

This Page Is Inserted by IFW Operations
and is not a part of the Official Record

BEST AVAILABLE IMAGES

Defective images within this document are accurate representations of the original documents submitted by the applicant.

Defects in the images may include (but are not limited to):

- BLACK BORDERS
- TEXT CUT OFF AT TOP, BOTTOM OR SIDES
- FADED TEXT
- ILLEGIBLE TEXT
- SKEWED/SLANTED IMAGES
- COLORED PHOTOS
- BLACK OR VERY BLACK AND WHITE DARK PHOTOS
- GRAY SCALE DOCUMENTS

IMAGES ARE BEST AVAILABLE COPY.

As rescanning documents *will not* correct images,
please do not report the images to the
Image Problem Mailbox.

RECEIVED

APR 19 2002

COMMONWEALTH OF AUSTRALIA

TECH CENTER 1600/2900

(Patents Act 1990)

IN THE MATTER OF: Australian
Patent Application 696764
(73941/94). In the name of:
Human Genome Sciences Inc.
- and -

IN THE MATTER OF: Opposition
thereto by Ludwig Institute for
Cancer Research, under Section
59 of the Patents Act.

STATUTORY DECLARATION

I, **Gary Baxter Cox** of Wray and Associates, 239 Adelaide Terrace, Perth WA 6101, Australia, declare as follows:

1. I am a Registered Patent Attorney, and a member of the firm Wray and Associates, Australian patent attorneys for Human Genome Sciences, Inc., the applicant in this matter. I have previously executed a statutory declaration in these proceedings on 13 December 2000 (my "first statutory declaration"), which contained 23 annexures. The annexures identified herein are numbered in consecutive order following the last annexure from my first statutory declaration.
2. Now produced and shown to me marked "GBC-24" is a copy of a statutory declaration by Peter Adrian Walton Rogers dated 26 October 2000 together with Exhibit 1 served in the opposition by Ludwig Institute for Cancer Research against Australian Patent Application 710696 by Genentech Inc.

WRAY & ASSOCIATES

Patent & Trade Mark Attorneys

6th Floor, GHD House
239 Adelaide Terrace, Perth
Western Australia 6000
Australia

Tel: (618) 9325 6122
Fax: (618) 9325 2883
Email: wray@wray.com.au
Our Ref: GBC: 100868

WBC
GBC



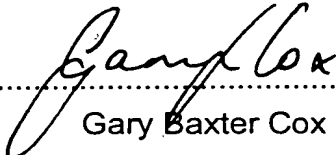
AND I make this solemn declaration by virtue of the Statutory Declarations Act, 1959 and subject to the penalties provided by that Act for the making of false statements in statutory declarations, conscientiously believing the statements contained in this declaration to be true in every particular.

DATED this: Twenty Second day of March 2002.

DECLARED at: Perth, Western Australia

BEFORE me:)


Patent Attorney


Gary Baxter Cox

COMMONWEALTH OF AUSTRALIA

(Patents Act 1990)

IN THE MATTER OF: Australian
Patent Application 696764
(73941/94). In the name of:
Human Genome Sciences Inc.

- and -

IN THE MATTER OF: Opposition
thereto by Ludwig Institute for Cancer
Research, under Section 59 of the
Patents Act.

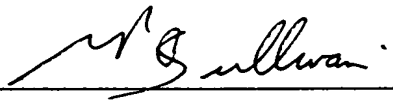
Annexure GBC-24

This is **Annexure GBC-24** referred to in my Statutory Declaration made this
Twenty Second day of March 2002.



Gary Baxter Cox

WITNESS:



Commissioner for Declarations/Solicitor
Patent Attorney/Justice of the Peace

AUSTRALIA

Patents Act 1990

IN THE MATTER OF Australian Patent
Application Serial No 710696 by Genentech,
Inc.

-and-

IN THE MATTER OF Opposition thereto
by Ludwig Institute for Cancer Research

STATUTORY DECLARATION

I, Peter Adrian Walton Rogers of the Department of Obstetrics and Gynaecology, Monash University, Clayton, Victoria, Australia, do solemnly and sincerely declare as follows:

Introduction

- 1.1 I am presently working as Associate Professor and NH&MRC Principal Research Fellow with the Department of Obstetrics and Gynaecology, Monash University, Victoria, Australia. Since receiving my Ph.D in 1983, I have worked substantially continuously as a scientific researcher in the U.K. and in Australia in areas of cellular and molecular biology. My research has included substantial studies and explorations in fields of wound healing, microvasculature, vascular endothelial growth factors, growth of endothelial cells on vascular grafts, tumor angiogenesis and other areas related to angiogenesis. In addition to my own research efforts and my collaborations with others, I receive numerous invitations to speak at national and international symposiums in these fields of study, I supervise post-graduate research of others, and I have authored and co authored numerous original research articles published in peer-reviewed journals. My detailed *curriculum vitae* is attached hereto as Exhibit 1.
- 1.2 I have been asked by the Ludwig Institute for Cancer Research ("Ludwig Institute") to serve as a scientific expert in connection with Ludwig Institute's opposition to the

issuance of a patent to Genentech, Inc., ("Genentech") based on Genentech's Australian Patent Application No. 710696 ("the Genentech application"). The patent application relates generally to a gene and protein for an alleged novel vascular endothelial growth factor (VEGF) called "VEGF-Related Protein" ("VRP"), and thus pertains to an area of biology closely related to my research and expertise. I understand that Ludwig Institute is a named co-applicant for a different patent application directed to subject matter that may be related to "VRP".

1.3 Ludwig Institute has explained to me that it has retained me for the purpose of providing expert scientific analysis of the Genentech application, as well as related literature, both past and contemporaneous, that may be relevant to the patentability of claims in the application. Ludwig Institute is compensating me for the time that I devote to providing my expert scientific analysis. However, I understand that I have an overriding duty to the Patent Office (and to any Australian Federal Court that should review the Patent Office decision) to provide objective scientific analysis that I believe to be truthful. I hereby affirm that, to the best of my knowledge and belief, factual statements herein are true and opinion statements herein represent my objective scientific opinion and analysis.

1.4 I believe that my background and experience, as outlined above, provides me with an understanding of the common general knowledge in the fields of the invention, in Australia, at the time that the U.S. priority application and the opposed Australian (PCT) application were filed. The relevant common general knowledge is the common general knowledge of an individual with an advanced degree (*e.g.*, Ph.D and/or M.D.), such as an individual being exemplified by biochemists, protein and/or polypeptide biochemists, molecular biologists, and/or cell biologists, or teams of biochemists, protein and/or polypeptide biochemists, molecular biologists, and/or cell biologists, involved in the isolation and characterization of nucleic acid sequences, automated or manual nucleic acid sequencing methods, performing and interpreting searches of publicly available databases for sequences displaying homology to a query sequence, transformation of prokaryotic and eukaryotic organisms with isolated nucleic acid sequences, expression of heterologous sequences in prokaryotic and

eukaryotic host cells and/or organisms, isolation and/or characterization of factors involved in cell growth and proliferation, especially but not limited to those factors associated with angiogenesis, in Australia at or before the priority date of the claims of the Genentech application.

- 1.5 Throughout this declaration, I may refer to Australian Patent Application No. 710696 using various terms such as "the opposed application," "the opposed patent," "the Genentech patent" or "the Genentech application." All such terms should be understood to refer to the same document. References to the "specification" should be understood as references to the descriptive portion of the application, including text and figures.
- 1.6 At the time that I execute this declaration in the year 2000, a significant body of literature has been published relating to the structure and functions of the gene and protein which the opposed patent refers to and I will refer to as "VRP." It is a complex protein that undergoes many stages of processing, and that appears to act as a growth factor for the vessels of the lymphatic system that convey lymph from tissues back into the blood. From my review of the file history of the Genentech application, I observed little or no mention or appreciation by the Australian Patent Office of any of the developments that occurred after Genentech filed its priority application. I think it would be helpful to the reader of this declaration to provide some context for the gene and protein of the invention that is not available from reading the Genentech application or its file history, but that may be relevant to the issues that I discuss below in this declaration in detail.
 - 1.6.1 There is general agreement from at least three different research groups, including Genentech, that the human gene which encodes "VRP" encodes a polypeptide that is 419 amino acids in length. Other research groups that independently discovered the "VRP" gene accorded it different names, such as "VEGF-C" (see Documents D1 & D2) or "VEGF2" (for Vascular Endothelial Growth Factor 2, see Documents D4 & D5). Most of the investigative

reports that are published in respected scientific journals use these other names, especially "VEGF-C".

1.6.2 Reports in respected scientific periodicals indicate that the processing of "VRP" (VEGF-C) is not limited to the mere removal of a signal peptide. Rather, extensive proteolytic processing occurs at both the amino- and carboxyl-terminal ends of the 419 amino acid "prepro" polypeptide, resulting in a much smaller polypeptide (eg., only about 110-130 amino acids) that has enhanced and/or new biological activities relative to the larger pre-processed forms from which it was derived. (See **Documents D1, D15, and D16**, and paragraphs 3.6.3 and 3.7.4 below, and documents cited therein.) However, in the Genentech application filed in 1995, there is no evidence presented of complex proteolytic processing.

1.6.3 At least one significant study involving transgenic animals indicates that a prominent function of the protein product of the VRP gene *in vivo* is to modulate growth of the lymphatic endothelia. The study is reported in Document D16 at Example 29, and also was published in the prestigious scientific journal *Science*. (See Jeltsch et al., "Hyperplasia of lymphatic vessels in VEGF-C transgenic mice," *Science* (1997), 276 (5317):1423.) The researchers inserted a VEGF-C cDNA (which encodes a polypeptide at least 99.5% identical to VRP) construct into fertilised mouse oocytes to generate transgenic mice that express the construct. The cDNA was attached to a human K14 keratin promoter to cause increased expression of VEGF-C in the skin. The researchers found that skin from the transgenic mice (in comparison to normal mice) was atrophic and that connective tissue was replaced by large lacunae (spaces or cavities) devoid of red cells, but lined with a thin endothelial layer. These distended vessel-like structures resembled those seen in human lymphangiomas, which are tumors of the skin composed of masses of dilated lymph vessels. The endothelia surrounding these lacunae appeared to express Flt4 abundantly. Collectively, the data and other data collected by

the researchers suggest that the VEGF-C/VRP over-expression in the mice caused growth of vessels having features of lymphatic vessels.

Lack of Novelty of Claims of the Genentech Application

2.1. Introduction

2.1.1 Through my involvement in this matter, I understand that the claims of a patent define the scope of the invention protected by the patent, and that a patent may only claim novel subject matter. Patent claims that encompass subject matter that was described in other patents, publications, or other documents that existed at the time of the effective filing date of the patent claim are unacceptable under Australian patent law. Such documents that were published before the effective filing date constitute "prior art." It is my understanding that the effective filing date of a patent is the actual filing date, or sometimes the filing date of a priority application identified by the patent, if the priority application provides support for the claim. Claims that include prior art subject matter within their scope lack novelty, and are said to be "anticipated" by the prior art.

2.1.2 In this section of my declaration, I provide an analysis of whether claims in the Genentech application encompass within their scope subject matter that had been described in the literature prior to 08 September 1995, the priority date of the Genentech application.

2.1.3 I have reviewed the specification and claims of the Genentech application, the written prosecution history of the Genentech application in the Australian patent Office, and related prior art. To the extent that the scope of the claims can be determined at all,¹ I have determined that at least patent claims 1-4, 9-10, 12, 14-20, and 22-28 include within their scope subject matter that was described in the prior art before the earliest claimed priority date

¹ As set forth below in the section titled "Lack of Clarity," many of the claims lack clarity. (See Section 5, below)

(08 September 1995). My detailed analysis follows. In paragraphs 2.2-2.2.2.1, I analyze the meaning of certain terminology that appears in many of the claims. Then, in paragraphs 2.3-2.17, I analyze the relationship of individual claims and prior art subject matter.

2.2 Analysis of the meaning and scope of limitations found in the claims.

2.2.1 Claim 1 of the Genentech application is directed to isolated biologically active human VEGF-related protein (VRP) having the ability to bind and stimulate phosphorylation of a Flt4 receptor. Almost all of the other claims (e.g., 2-20, 23-28) specify biologically active human VRP or refer back to an earlier claim that specifies biologically active human VRP.

2.2.1.1 The Genentech application explicitly defines "human VRP" at page 5, lines 12-25. The definition is noteworthy in that it explicitly includes a potentially infinite number of polypeptides,² and not just the polypeptide that the invention had reportedly isolated from humans and that has the amino acid sequence shown in Figure 1. For example, the definition at page 5 encompasses almost any biologically active deletional, insertional, or substitutional variants of the Figure 1 sequence that either (a) have at least 265 amino acids, or (b) include at least residues 1-29 of Figure 1. Thus, the definition of VRP is intended to include biologically active variants of the Figure 1 sequence that have been formed by removing or adding amino acids to the Figure 1 sequence, or by replacing amino acids in Figure 1 with alternative amino acids.

2.2.1.2 The Genentech application defines "biologically active" at page 5, beginning at line 26. The definition is "having the ability to bind to, and stimulate phosphorylation of, the Flt4 receptor." There is some ambiguity thereafter, because the next two sentences seem to contemplate stimulation/activation or

²

See also paragraphs 5.4-5.4.3 below, repeated here by reference.

inhibition of the receptor and receptor-mediated activities. Activation and inhibition are generally considered to be opposites. It is unclear whether the applicants intended this continued discussion to be part of the definition of "biologically active."

- 2.2.2. Claim 11 of the Genentech application recites, "The composition of claim 10 further comprising a cell growth factor other than said [human VRP] protein." Claim 13 contains a similar recitation.

2.2.2.1 The Genentech application does not appear to explicitly define the term "cell growth factor" as used in these claims. For example, there is no definition specifying that this term refers only to proteins that induce the growth of specific cell types and not others, such as the proteins recited at page 28, lines 9-12, of the Genentech application. The term, given its broadest reasonable interpretation, would appear to encompass any nutrient media, vitamin, mineral, salt, organic energy source, water, or other materials that living cells require to grow. Exemplary materials are discussed at page 19, lines 1-14, of the Genentech application, which pertain to mammalian cell growth media.

2.3. Identification of Relevant Art.

- 2.3.1 **Document D1** is a published Australian patent application which claims priority benefit from **Document D3**, which was filed on 01 August 1995 (as well as other applications filed in 1996). It was explained to me that, for novelty purposes, **Document D1** is prior to the Genentech application for subject matter that is disclosed in **Documents D1 and D3**, because the priority application **Document D3** was filed prior to the Genentech application priority date (08 September 1995). Thus, claims in the Genentech application that encompass subject matter that is disclosed in both **Documents D1 and D3** lack novelty over **D1 and D3**.

- 2.3.2 **Document D7** is a published Australian patent application that was filed as an international application on 09 June 1995, prior to the Genentech application priority date. Thus, for novelty purposes, **Document D7** is prior to the Genentech application

for everything that **Document D7** discloses. Claims of the Genentech application that encompass subject matter of **Document D7** lack novelty.

2.4. Analysis of individual claims.

2.4.1 In the following paragraphs, I analyze whether individual claims of the Genentech application encompass subject matter that was disclosed in the prior art (*e.g.*, the patent documents and journal articles that were published prior to 08 September 1995). The paragraphs below provide an analysis of claims with scope sufficiently large to encompass subject matter that had been disclosed in published literature prior to 08 September 1995, or disclosed in published Australian patent applications of others that claim priority filing dates prior to 08 September 1995. The publications to which I refer do not necessarily disclose the exact VRP nucleotide or deduced amino acid sequence shown in the Genentech application. However, as I explain herein, the claims at issue are not limited in scope to the exact VRP sequences disclosed in the application, but are much broader.

2.5 Claim 1

2.5.1 Claim 1 of the Genentech application is directed to "Isolated biologically active human VEGF-related protein (VRP) containing at least 265 amino acids having the ability to bind and stimulate phosphorylation of a Flt4 receptor."

2.5.2 As explained in paragraph 2.2.1.1, "Human VRP" is not limited to the single sequence shown in Figure 1, because it is defined as "a polypeptide sequence containing at least residues -20 to 399, inclusive, or residues +1 to 399, inclusive, of the amino acid sequence shown in Figure 1, including residues -5 to 399, inclusive, and residues -4 to 399, inclusive, of the amino acid sequence shown in Figure 1, as well as biologically active deletional, insertional, or substitutional variants of the above sequences having at least 265 amino acids and/or having at least residues +1 through 29, inclusive, of Figure 1." (See Genentech application at p. 5, lines 12-16.)

2.5.3 **Document D1** and its first priority application, **Document D3**, each disclose one or more purified and isolated human polypeptides of at least 265 amino acids and teach that the polypeptide(s) constitute a precursor of a Flt4 ligand (designated "VEGF-C") that binds Flt4 and stimulates Flt4 phosphorylation. (See, e.g., **Document D1** at pp. 7-9, 26-27, 49-50; Figure 8; and SEQ ID NO: 33; **Document D3** at p. 5; Figure 9; and SEQ ID NO: 33.) These polypeptide(s) is/are either identical to the 419 amino acid VRP sequence shown in Figure 1 of the Genentech application (or to a portion thereof of at least 265 amino acids), or is/are at least about 99% identical to the VRP sequence, with one or a few substitutional variations.³ (See **Document D1** amino acid sequences at SEQ ID NO: 33 and Figure 8; **Document D3** at p. 9; Figure 9; and SEQ ID NO: 33.) Thus, **Documents D1 and D3** teach an isolated polypeptide that satisfies all of the limitations (structural and functional) of claim 1, and did so (through **Document D3**) prior to the priority date of the Genentech application.

2.6 Claims 2-4

2.6.1 Claims 2-4 of the Genentech application depend from claim 1 and further limit claim 1 only by specifying protein length in terms of amino acid ranges of 265-450 amino acids (claim 2); 300-450 amino acids (claim 3); and 350-450 amino acids (claim 4). These length limitations are met by the approximately

³ The VRP sequence disclosed in the Genentech application contain an ambiguity in that the "TAT" at codon 94 of the cDNA depicted in Figure 1B encodes the amino acid tyrosine according to the universal genetic code, whereas Figure 1B teaches that the amino acid at position 94 of the amino acid sequence is a threonine. (Residue 94 of Figure 1 corresponds to residue 114 of the VEGF-C precursor sequence set for in SEQ ID NO: 33 of **Document D1**.) Throughout this section pertaining to novelty, I will frequently refer to the Flt4 ligand precursor polypeptide of **Documents D1 and D3**. It should be understood from paragraphs 2.5-2.5.3 that this polypeptide is sufficiently similar to the VRP sequence taught in the Genentech application to satisfy the definition of VRP taught in the Genentech application, since the definition permits substitutional variations.

350 amino acid VEGF-C sequence of **Document D1** and its first priority document. (See **Document D1** amino acid sequences at SEQ ID NO:33 and Fig. 8; **Document D3** at p. 9, Fig. 9, and SEQ ID NO:33.) Thus, the human VRP of claims 2-4 is not novel in view of the VEGF-C polypeptide and activity teachings in **Documents D1** and **D3**.

2.7 Claims 9-10

2.7.1 Claim 9 of the Genentech application recites, "A composition comprising the protein of any one of claims 1-8 and a pharmaceutically acceptable carrier." Claim 10 recites, "A pharmaceutical composition useful for promotion of vascular endothelial cell growth comprising a therapeutically effective amount of the protein of any one of claims 1-8 in a pharmaceutically acceptable carrier."

2.7.2 As explained in particulars 2.5-2.6.1, repeated here by reference, **Document D1** and its first priority application (**Document D3**) teach VEGF-C precursor polypeptides that meet the limitations of at least claims 1-4. Each of these documents also teach to mix VEGF-C polypeptides with an appropriate pharmaceutically acceptable vehicle and teach to use such polypeptides and compositions to, e.g., accelerate angiogenesis and to promote the endothelial functions of lymphatic vessels. (See, e.g., **Document D1** at pp. 15-17; **Document D3** at pp. 6-7 and claim 12.) Thus, **Documents D1** and **D3** teach compositions that satisfy all of the structural and functional limitations of claims 9-10 of the Genentech application. **Documents D1/D3** contained these teachings before the priority date of the Genentech application.

2.7.3 The Genentech application is prophetic in the sense that it does not indicate (e.g., in working examples) that the inventors had actually prepared any pharmaceutical compositions embraced by claims 9-10. In this sense, the scientific evidence in **Documents D1** and **D3** relating to claims 9-10 meets or exceeds the supporting scientific disclosure for claims 9-10 found in the Genentech application.

2.8 Claim 12

2.8.1 Claim 12 of the Genentech application recites "Use of the protein of any one of claims 1-8 or the composition of claim 9 or 10 in the manufacture of a medicament for treating trauma affecting the vascular endothelium or for treating a dysfunctional state characterised by lack of activation or lack of inhibition of a receptor for VRP in a mammal."

2.8.2 As explained above in particular paragraphs 2.5-2.7.3, repeated herein by reference, **Document D1** and its first priority application (**Document D3**) each teach VEGF-C precursor polypeptides which meet the limitations of at least claims 1-4, and teach to formulate the polypeptides with a pharmaceutically vehicle such as a diluent or carrier that satisfies the limitations of claims 9-10. These documents also teach that VEGF-C is a Flt4 ligand and contemplate use of the ligand to stimulate cells such as lymphatic endothelial cells that express the Flt4 receptor. (See, e.g., **Document D1** at pp. 16-17; **Document D3** at p. 6-7.) Use of VEGF-C to treat conditions such as wounds, regrowth of lymphatic vessels in transplants, to prevent inflammation, edema, or aplasia of lymphatic vessels, lymphatic obstructions, elephantiasis, and Milroy's disease is contemplated (see, e.g., **Document D1** at p. 15; **Document D3** at pp. 6-7). Thus, **Documents D1 and D3** teach the protein of claims 1-4, the composition of claims 9-10, and their use as recited in claim 12. **Documents D1/D3** contained these teachings before the priority date of the Genentech application.

2.8.3 The Genentech application does not indicate (e.g., in working examples) that the inventors had actually used the VRP protein of any of claims 1-8 or composition of claims 9-10 in the manufacture of a medicament as recited in claim 12. The Genentech application also fails to provide any scientific evidence that any particular dysfunctional state is characterized by lack of activation or lack of inhibition of a VRP receptor. Thus, the scientific evidence in **Documents D1 and D3** that supports claim 12 equals or exceeds

the supporting scientific evidence for claim 12 found in the Genentech application. In fact, the dysfunctional states relating to the lymphatic system described in **Documents D1 and D3** would appear to be among the more promising indications for VRP polypeptides based on initial *in vivo* activity studies that I have seen in the literature. (See paragraph 1.6.3, above.)

2.9 Claim 14

2.9.1 Claim 14 of the Genentech application recites "A method for stimulating the phosphorylation of a tyrosine kinase domain of a Flt4 receptor comprising contacting an extracellular domain of the Flt4 receptor with the protein of any one of claims 1-8."

2.9.2 As I explain in paragraphs 2.5-2.6.1, repeated here by reference, **Document D1** and its first priority application teach a Flt4 ligand precursor polypeptide that meets the limitations of at least claims 1-4. **Documents D1 and D3** also teach to use the Flt4 ligand to stimulate Flt4 phosphorylation by contacting the extracellular domain of Flt4 expressed in cells with the ligand. (See, e.g., **Document D1** at pp. 49-50; **Document D3** at pp. 25-26.) Thus, **Documents D1 and D3** teach the method recited in claim 14, and contained these teachings before the priority date of the Genentech application.

2.10 Claim 15

2.10.1 Claim 15 of the Genentech application recites, "A chimeric polypeptide comprising the protein of any one of claims 1-8 fused to a tag polypeptide sequence."

2.10.2 The Genentech application provides a definition of "epitope tagged" at page 6, first paragraph. Epitope tagging also is described at page 23. Since claim 15 recites "a chimeric polypeptide" and "a tag polypeptide" and does not recite "epitope tagged", I would conclude that this definition at page 6 provides guidance for interpreting claim 15, but does not necessarily totally restrict the definition of claim 15. For "epitope tagging" the tag polypeptide is said to

have enough residues to provide an epitope against which an antibody can be raised, and to be short enough such that it does not interfere with activity of VRP. Exemplary tag size ranges of 8-50 residues are taught. VRP fusions are also described at page 20 of the Genentech application.

2.10.3 **Document D1** and its first priority application, **Document D3**, explicitly contemplate expression of the Flt4 ligand protein as a chimeric/fusion protein. For example, these documents contemplate using a GST fusion protein to raise antibodies against the Flt4 ligand polypeptide. (See **Document D1** at p. 51, lines 29-31; **Document D3** at p. 27, lines 12-13.) In my opinion GST sequences fused to a polypeptide of interest could be used as tag sequences to isolate the polypeptide of interest. (Antibodies could be raised against the GST sequences which would not substantially cross-react with other epitopes.) Thus, I would conclude that **Documents D1** and **D3** describe a Flt4 ligand/GST chimeric polypeptide that satisfies the limitations of claim 15, thereby anticipating claim 15.

2.11 Claims 16 and 17

2.11.1 Claim 16 of the Genentech application recites "A monoclonal antibody which binds to the protein of any one of claims 1-8 and neutralises a biological activity of the protein."

2.11.2 As explained in detail in paragraphs 2.5-2.6.1, repeated here by reference, **Document D1** and its first priority application (**Document D3**) each teach Flt4 ligand precursor polypeptides which meet the limitations of at least claims 1-4. These documents also teach that antibodies, both monoclonal and polyclonal, can be generated against the Flt4 ligand polypeptides. (See, e.g., **Document D1** at p. 14, 51; **Document D3** at p. 6, 27.) These documents teach that antibodies are potential Flt4 ligand antagonists to, e.g., control endothelial cell proliferation and block ligand-mediated stimulation of the Flt4 receptor. (See, e.g., **Document D1** at pp. 14, 16; **Document D3** at pp. 7, 8.) Thus, prior to the filing date of the Genentech application, **Documents D1/D3**

taught to make monoclonal antibodies recited in claim 16 and taught that such antibodies could be used to neutralize the receptor-stimulating biological activity of the Flt4 ligand protein.

2.11.3 Claim 17 depends from claim 16 and recites that the biological activity of the protein is promoting neovascularization or vascular permeability or vascular endothelial cell growth in a mammal.

2.11.4 The limitations of claim 17 are met by **Documents D1** and its first priority application **Document D3**, for the reasons discussed with respect to claims 12 and 16 in paragraphs 2.8-2.8.3 and 2.11.1-2.11.2, repeated here by reference. Promoting regrowth or permeability of lymphatic vessels is explicitly taught in **Documents D1 and D3** as activities/uses of the Flt4 ligand. (See **Document D1** at p. 15; **Document D3** at pp. 6-7, for example.) Thus, claim 17 is not novel in view of **Documents D1 and D3**.

2.12 Claim 18

2.12.1 Claim 18 specifies a monoclonal antibody that binds to the N-terminal portion from residues -20 through 137, inclusive, or from residues 1 through 137, inclusive, of the amino acids sequence shown in Figure 1.

2.12.2 Nothing in the Genentech application indicates that these regions of VRP correspond to an important functional domain of VRP, or have special significance for anti-VRP antibody production (e.g., because they produce antibodies more useful than antibodies raised against other portions of VRP). Rather, residues -20 to 137 seem to have been chosen only because they do not correspond to portions of VRP that are encoded by sequences that existed in databases prior to the filing date of the Genentech application. (See Figure 4.)

2.12.3 A mature (processed) form of VEGF-C taught in **Documents D1 and D3** includes residues corresponding to residues 83-137 of the sequence shown in

Figure 1 of the Genentech application. (See N-terminal sequence analysis in **Document D1**, p. 43; see also **Document D3** at p. 19, lines 9-19.) In fact, **Documents D1** and **D3** explicitly contemplate making (or have made) antibodies to the amino terminal peptide portion of mature VEGF-C, which corresponds to a peptide beginning at about residue 83 of the VRP sequence taught in Figure 1 of the Genentech application and referred to in claim 18. (See **Document D1** at p. 51, lines 27-31, and page 64, lines 1-30; **Document D3** at p. 19, lines 9-19, and p. 27, lines 10-11.) For example, an amino terminal peptide of 18 or 23 residues of mature VEGF-C isolated from PC-3 cells, as taught in **Documents D1/D3**, corresponds with approximately amino acids 83-100 or 83-105 of the VRP sequence taught in Figure 1 of the Genentech application. Thus, polyclonal or monoclonal antibodies raised against the amino terminal VEGF-C peptide, as taught in **Documents D1/D3**, are antibodies that bind to the N-terminal portion of VRP from -20 through 137 of the amino acid sequence of Figure 1 as recited in claim 1 of the Genentech application, because the larger sequence from -20 to 137 recited in claim 18 includes the smaller sequence from 83-105 taught in **Documents D1/D3** for use as an antigen. Thus, the antibodies taught in **Document D1** and its first priority application (**Document D3**), discussed with respect to claim 16 in paragraphs 2.10-2.10.2, are encompassed by claim 18.

2.13 Claims 19 and 20

2.13.1 Claim 19 of the Genentech application recites, "A composition comprising the antibody of one of claims 16, 17 or 18 and a pharmaceutically acceptable carrier."

2.13.2 **Document D1** and its priority application (**Document D3**) explicitly and/or inherently teach a composition comprising all of the limitations of claim 19. For example, **Documents D1** and **D3** teach the antibodies of claims 16-18, as described in detail in paragraphs 2.11 - 2.12.3, repeated here by reference. With respect to the Flt4 ligand, the documents explicitly teach to make pharmaceutical compositions using pharmaceutically acceptable carriers,

which is the conventional approach for any substance that is to be administered therapeutically. (See, e.g., **Document D1** at p. 15; **Document D3** at p. 6, claim 12.) Both **Documents D1** and **D3** contemplate therapeutic and diagnostic uses of anti-Flt4 ligand antibodies *in vivo* (see, e.g., **Document D1** at p. 14, 16; **Document D3** at pp. 6-7), and any practitioner in the art would know that such antibodies (like the ligand) would only be administered to a patient diluted in a pharmaceutically acceptable carrier. Thus, it is my opinion that the teachings relating to antibodies and therapy in **Documents D1** and **D3** expressly or inherently satisfy the limitations of claim 19.

- 2.13.3 Claim 20 of the Genentech application recites, "Use of the antibody of any one of claims 16-18 or the composition of claim 19 in the manufacture of a medicament for treating diseases or disorders characterised by undesirable excessive neovascularization or vascular permeability in a mammal or for treating a dysfunctional state characterized by excessive activation or inhibition of a receptor for VRP in a mammal."
- 2.13.4 All of the limitations of claim 20 are met by **Document D1**, as discussed above, e.g., with respect to claims 16-18 and 9-10, which the Opponent hereby repeat by reference. (See paragraphs 2.7-2.7.3 and 2.11-2.12.2.)
- 2.13.5 The Genentech application does not indicate (e.g., in working examples) that the inventors had actually prepared any antibodies embraced by claims 16-18, or prepared compositions embraced by claim 19; or used such antibodies or compositions in the manufacture of a medicament as recited in claim 20. Thus, the scientific data in support of these claims in **Documents D1** and **D3** meets or exceeds the supporting scientific data for claims 16-20 found in the Genentech application.

2.14 Claim 22

2.14.1 Claim 22 of the Genentech application recites, "A method for treating Kaposi's [sic] sarcoma or a dysfunctional state characterised by excessive activation of inhibition of a receptor for VRP in a mammal comprising administering to the mammal an effective amount of a VRP antagonist."

2.14.2 **Document D1** and its first priority application (**Document D3**) teach an Flt4 ligand precursor that satisfies the definition of "VRP" and teach that the Flt4 ligand binds and stimulates the Flt4 receptor. (See, e.g., **Document D1** at pp. 7-9, 26-27, 49-50; **Document D3** at pp. 5, 25-26. See also paragraphs 2.5-2.6.1, repeated here by reference.) Likewise, these documents teach to use (e.g., administer) inhibitors of the Flt4 ligand to treat dysfunctional states characterized by excessive activation of the Flt4 receptor. (See, e.g., **Document D1** at pp. 15-16; **Document D3** at pp. 6-7.) Thus, the teachings of **Document D1** and its first priority application meet the limitations of claim 22.

2.14.3 **Documents D7-D8** disclose, for example, the Flt4 receptor tyrosine kinase; antibodies that specifically recognize the extracellular domain of Flt4 receptor; and methods of stimulating or antagonizing the function of Flt4 in lymphatic vascularization and in inflammatory, infectious and immunological conditions using pharmaceutical compositions comprising Flt4 binding compounds, such as Flt4 antibodies. **Document D7-D8** contemplate treatment of conditions where Flt4 function is associated with disease such as metastatic cancers, lymphomas, inflammation, infections, and immunological diseases. (See, e.g., **Documents D7-8** at pp. 3-5 (especially p. 5, lines 24-32) and Example 9.) The Genentech application teaches that the Flt4 receptor is a receptor for VRP. Thus, anti-Flt4 antibodies that block Flt4 stimulation constitute VRP antagonists, because such antibodies antagonize (inhibit) VRP-mediated stimulation of Flt4. Thus, use of materials and methods as taught in **Documents D7 and D8** for administering anti-Flt4 antibodies to mammals for

these stated purposes meet the limitations of claim 22 of the Genentech application.

2.14.4 The Genentech application is prophetic in that it does not indicate (e.g., in working examples or scientific data) that the inventors had actually used a VRP antagonist to treat Kaposi's sarcoma or any dysfunctional state as recited in claim 22. Thus, the scientific data in **Documents D1-D3** and **D7-D8** that is relevant to claim 22 meet or exceed the supporting data for claim 22 found in the Genentech application.

2.15 Claim 23

2.15.1 Claim 23 of the Genentech application recites, "An isolated nucleic [sic] acid molecule encoding the protein of any one of claims 1-8."

2.15.2 As explained in paragraphs 2.5-2.6.2, repeated here by reference, **Document D1** and its first priority application (**Document D3**) each teach Flt4 ligand polypeptides and/or polypeptide precursors that meet all of the limitations of at least claims 1-4. Each of these documents also teach polynucleotides encoding the polypeptides. (See, e.g., **Document D1** nucleotide sequences at SEQ ID NO: 32; **Document D3** nucleotide sequences at SEQ ID NO: 32 and Figure 9.) Thus, **Document D1** and priority document teach nucleic acids that satisfy all of the limitations of claim 23.

2.16 Claims 24-26

2.16.1 Claim 24 of the Genentech application recites, "The nucleic acid molecule of claim 23 further comprising a promoter operably linked to the nucleic acid molecule." Claim 25 recites, "A vector comprising the nucleic acid molecule of claim 23." Claim 26 recites, "An expression vector comprising the nucleic acid molecule of claim 23 operably linked to control sequences recognised by a host cell transformed with the vector."

2.16.2 As explained in paragraphs 2.15-2.15.2 and 2.5-2.6.2, repeated here by reference, **Documents D1 and D3** teach nucleic acid molecules that satisfy the requirements of claim 23. **Document D1** and its first priority application (**Document D3**) also teach and claim vectors comprising a DNA encoding the Flt4 ligand, and host cells comprising the vectors. Vectors capable of expressing the Flt4 ligand under the control of appropriate promoters and other control sequences are explicitly contemplated. (See, e.g., **Document D1** at p. 13 & claims 27-28; **Document D3** at p. 6 and claims 5-7.) Thus, **Document D1** and its first priority application, **Document D3**, teach the additional limitations of claims 24-26.

2.17 Claims 27-28

2.17.1 Claim 27 of the Genentech application recites, "A host cell comprising the nucleic acid molecule of claim 23."

2.17.2 The teachings of **Documents D1** and its first priority application (**Document D3**) meet the limitations of claims 23-26 for the reasons discussed in paragraphs 2.15-2.16.2, repeated here by reference. In addition, **Documents D1 and D3** teach host cells that comprise vectors that comprise the nucleic acids that satisfy the limitations of claim 23. (See, e.g., **Document D1** at p. 13, lines 15-27, pp. 49-50 (Example 11), p. 54 (Example 13), and so on; **Document D3** at p. 5, lines 26-27, p. 6, lines 2-7, pp. 25-26 (Example 11), and claim 7.) Thus, the teachings of **Documents D1 and D3** satisfy all of the limitations of claim 27 of the Genentech application.

2.17.3 In addition, **Documents D1 and D3** each teach the prostatic adenocarcinoma cell line PC-3 which produces an Flt4 ligand polypeptide that is identical or essentially identical to the VRP sequence taught in the Genentech application, and that satisfies the limitations of claim 1 of the Genentech application. (See Examples 4-5 of **Documents D1 and D3**. The cell line secretes a proteolytically processed form of the polypeptide.) This cell line inherently comprises a nucleic acid molecule that encodes the Flt4 ligand protein that it

produces. This fact would be generally accepted by competent practitioners in this field, since the process by which cells make proteins involves transcribing and translating a nucleic acid molecule in the cells that encode the protein. Moreover, the fact that the PC-3 cell line comprises a nucleic acid that encodes the Flt4 ligand protein is confirmed by the cDNA isolation experiments described in Examples 6-10 of **Documents D1** and **D3**. (The ability to isolate the Flt4 ligand cDNA means that the cells comprise DNA and RNA nucleic acid molecules that encode the Flt4 ligand.) Thus, unless there is a requirement for claim 27 that the VRP nucleic acid of the cell must have first been physically isolated and then introduced into the cell, it would appear that the PC-3 cell line described in **Documents D1** and **D3** and deposited with the ATCC also satisfies the requirements of claim 27. (Human cells in nature also would satisfy the limitations of claim 27 under this analysis.)

2.17.4 Claim 28 recites, "A method of producing VRP comprising culturing the host cell of claim 27 and recovering VRP from the host cell culture."

2.17.5 **Document D1** and its first priority application (**Document D3**) each provide and claim vectors comprising a nucleic acid molecule encoding the Flt4 ligand, and host cells comprising the nucleic acids or vectors, as explained in detail above with respect to claims 23-27 in paragraphs 2.15-2.17.3, repeated here by reference. Vectors capable of expressing the Flt4 ligand under the control of appropriate promoters and other control sequences are explicitly contemplated. Purification of the Flt4 ligand from culture medium, e.g., via Flt4 affinity chromatography, also is taught. (See, e.g., **Document D1** at pp. 13, 41-43; **Document D3** at pp. 6, 17-19.) Thus, **Documents D1** and **D3** teach a method that meets the limitations of claim 28.

D. Conclusion

2.18 For the reasons outlined above, it is my opinion that at least claims 1-4, 9-10, 12, 14-20, and 22-28 are anticipated by the prior art.

Insufficiency

A. Introduction

3.1 Through my involvement in this matter, it is my understanding that Australian patent law (Section 40(2)(a)) includes a sufficiency requirement that focuses on whether the specification of a patent application is sufficient to disclose the method of carrying out the invention to a person reasonably competent in the relevant field of endeavor and equipped with the common general knowledge in that field.

3.1.1 It was explained to me that the evaluation for sufficiency should take into account the common general knowledge in the art, in the sense that gaps in a patent application are not necessarily problematic when the skilled practitioner can fill the gaps with reference to the common general knowledge. At the same time, for sufficiency to exist, further inventive ingenuity should not be required to practice the claimed invention. If a competent person cannot achieve the promised result because of deficiencies in the information given in the specification, there is insufficiency.

3.1.2 I was asked to consider whether the specification of the Genentech application included teachings that were commensurate in scope with the claims. It was explained to me that the directions provided in the specification must be sufficient for the execution of the invention throughout the breadth or range of the claims, and that an applicant who chooses to claim an invention broadly has an obligation to make a correspondingly wide disclosure.

3.1.3 It was also explained to me that the sufficiency of an application's disclosure is evaluated as of the application's filing date and/or priority date, and not from the state of the art as it exists today. If the claimed subject matter is insufficiently supported by the priority application (*e.g.*, the priority application is non-enabling), then the claims are not entitled to the benefit of the priority date.

3.1.4 In this section of my declaration, I provide an analysis of whether the specification of the Genentech application contains a disclosure sufficient to practice the claimed invention.

B. Analysis

3.2 Inadequate support for VRP up to 450 amino acids in length.

3.2.1 Claims 1-4, 9-17, 19-20, and 23-28 recite a VEGF related protein (VRP) containing at least up to about 450 amino acids. In particular, dependent claims 2-4 explicitly recite VRP size ranges up to 450 amino acids. Independent claim 1 is apparently intended to be at least as broad as the claims which depend from it, so by implication claim 1 is apparently intended to cover VRP of at least about 450 amino acids. Claims 9-17, 19-20, and 23-28 depend from claims 1-4 without further restricting the maximum size (amino acid sequence length) of VRP.

3.2.2. However, the Genentech application does not describe any VRP sequence longer than 419 amino acids. (See, e.g., Genentech application at Figure 1.) Thus, I would conclude that the teachings of VRP proteins in the Genentech application are not commensurate in scope with the claims, from the standpoint of the claim limitations directed to VRP protein length (e.g., of about 450 amino acids).

3.3 Inadequate explanation of VRP opposing activities

3.3.1. Claims 12-13, 20, and 22 recite two diametrically opposed activities for VRP (claims 12-13) or for VRP antagonists (claims 20, 22).

3.3.2 For example, claim 12 contemplates using a biologically active VRP protein to treat EITHER a dysfunctional state characterized by lack of activation of a VRP receptor OR a dysfunctional state characterized by lack of inhibition of a VRP receptor. Since the Genentech application defines VRP biological activity as a receptor stimulating activity (see p. 5, line 26 et seq.), it would seem plausible that VRP might be used to treat a disease that is characterized by lack of activation of the VRP receptor. (The

Genentech application does not actually demonstrate such disease treatment.)

However, there is no clear scientific rationale why a biologically active VRP would be useful to remedy a disease characterized by *lack of inhibition* of a VRP receptor, because a biologically active VRP would not be expected to inhibit a VRP receptor, but rather would be expected to activate it. (Further activation of a VRP receptor in a patient having a disease characterized by lack of inhibition of VRP receptors would be expected to exacerbate, rather than alleviate, the disease or its symptoms.)

Likewise, there is no explanation of how a single molecule (e.g., a biologically active VRP molecule) possesses two opposed activities. There also is no explanation in the Genentech application as to when the VRP molecule possesses one activity versus the other, or how to select a particular activity for practicing the recited method.

- 3.3.3. Analogous reasoning applies to claim 20 of the Genentech application, which recites use of an antibody which binds and "neutralises" biologically active VRP to treat a dysfunctional state characterized by *either excessive activation or inhibition* of a VRP receptor. The Genentech application fails to explain, scientifically, how an antibody that neutralizes VRP biological activity could treat both diseases characterized by excessive receptor activation or excessive receptor inhibition. (Neutralizing VRP protein in a patient having a disease characterized by excessive inhibition of a VRP receptor would be expected to further inhibit activity of the receptor, thereby exacerbating the disease or its symptoms.)
- 3.3.4. The reasoning of paragraph 3.3.2 applies equally to claim 13, which depends from claim 12.
- 3.3.5. Similarly, claim 22 recites a method for treating a dysfunctional state characterized by *either excessive activation or inhibition* of a VRP receptor with a VRP antagonist. The Genentech application identifies VRP antibodies as VRP antagonists, and the reasoning of paragraph 3.3.3 applies to claim 22. Scientifically, it is unclear how an antagonist of a VRP receptor would be expected to be useful to treat a disease state that is characterized by excessive inhibition of the VRP receptor. An antagonist might be expected to worsen such a dysfunctional state.

3.3.6 In addition to failing to adequately explain the inconsistent VRP activities recited in claims 12-13, 20, and 22, the Genentech application fails to adequately explain what dysfunctional states are encompassed by claims 12-13, 20, and 22.

3.3.6.1 In its definitions section, the Genentech application identifies a huge number of diseases or disorders allegedly characterized by undesirable excessive neovascularization or vascular permeability (see, e.g., page 8) but no specific dysfunctional states characterized by excessive activation or inhibition of the VRP receptor, Flt4. Then at pages 24-25, the application continues to discuss a large number of therapeutic uses associated with blood vessel regrowth or repair. At pages 34-35, the application presents a large number of therapeutic uses associated with VRP antibodies, including treatment of about forty neoplastic disorders. However, there is an inadequate explanation of which of the many target diseases and conditions constitute the "dysfunctional state" recited in the claims.

3.3.7 Even if I ignore the internal inconsistency of claims 12-13, 20, and 22, and the inadequate explanation of what dysfunctional states are intended, I reach the conclusion that the Genentech application provides inadequate explanation for how to treat the disorders or why the treatment would even be expected to work.

3.3.7.1 The Genentech application teaches, through its citation of prior art, that Flt4 expression during development is first observed in mouse embryos in endothelial cell precursors, and then, as development proceeds, becomes confined to the venous and lymphatic endothelium and finally becomes restricted to the lymphatic vessels. (See pp. 1-2.) The application further teaches, "Consistent with this finding, adult human tissues show Flt4 expression in lymphatic endothelia while there is a lack of expression in arteries, veins, and capillaries." (See p. 2, first paragraph.)

3.3.7.2 The receptor identified for VRP is Flt4, and VRP biological activity is defined as the ability to bind to and stimulate phosphorylation of Flt4. (See Genentech application at p. 5.) The Genentech application teaches that VRP does not interact appreciably with the VEGF receptors Flt1 and Flk1 that are known to be expressed in the endothelia of blood vessels. (See Genentech application at p. 3, first paragraph, and p.43, last paragraph.)

3.3.7.3 The Genentech application does not demonstrate that VRP or VRP antibodies are effective to treat any of the conditions discussed in the application.

3.3.7.4 In view of the analysis in the preceding paragraphs 3.3.6-3.3.7.3, it is my opinion that the Genentech application contains an inadequate explanation for the uses enumerated generically in claims 12-13, 20, and 22 and specifically throughout the application's discussion of therapy. A competent practitioner in this field would discern from the application that VRP stimulates Flt4 receptor, whose expression is restricted to lymphatic endothelia, and does not appreciably interact with known blood vessel receptors Flt1 and Flk1. The teaching that VRP interacts only with a receptor that is not expressed appreciably in blood vessels would be inadequate for understanding how to treat the many disorders related to blood vessels recited in the claims and application, or the other disorders recited in the application. Since there are no examples of treatment and no explanation or rationale as to why the treatment would work, it is my opinion that the Genentech application provides inadequate support for the uses or claims 12-13, 20, and 22.

3.4 Inadequate teachings relating to Kaposi's sarcoma.

3.4.1 Claim 22 recites a method for treatment of Kaposi's sarcoma. Kaposi's sarcoma is a serious cancer, and the Genentech application fails to demonstrate successful treatment of this sarcoma. Likewise, the Genentech application fails to teach successful treatment in an animal model that is considered predictive of success in humans, and fails to teach the killing of such sarcoma cell *in vitro*. In fact, even though the Genentech application suggests that VRP antibodies could be used to treat

roughly forty neoplastic conditions (see pp. 34-35), the Genentech application does not provide any scientific evidence or even scientific reasoning as to why treatment of Kaposi's sarcoma (not to mention the approximately forty other unclaimed diseases) would be effective.

3.5 Inadequate characterization of the complete polypeptide genus encompassed by claims.

- 3.5.1. The support for the claims (e.g., at least claims 1-4, 9-17, 19-20, 22-28) provided by the Genentech application is inadequate because the characterizing features of the claims could be construed to cover products (e.g., polypeptides, polynucleotides, antibodies, antagonists) and uses of such products that were not known to exist and that a person reasonably competent in the field would not have known existed; and that owe nothing to the teachings of the Genentech application.
- 3.5.2 Claim 1 recites, "Isolated biologically active human VEGF-related protein (VRP) containing at least 265 amino acids having the ability to bind and stimulate phosphorylation of a Flt4 receptor." The dependent claims identified above contain no further limitation specifically directed to *a particular* amino acid sequence, such as the Figure 1 VRP cDNA and amino acid sequences depicted in the Genentech application.
- 3.5.3 The stated definition of "human VRP" in the Genentech application explicitly includes deletional, insertional, and substitutional variants of the single VRP sequence taught in Figure 1 of the application. (See analysis in paragraph 2.2.1.1 above, repeated here by reference.)
- 3.5.4 Subsequent to the filing of the Genentech application, researchers who are not the inventors of the Genentech application have discovered at least one other human growth factor, VEGF-D, that binds and stimulates phosphorylation of a Flt4 receptor. VEGF-D is characterized in the following scientific and patent literature:

3.5.4.1 **Document D12:** Achen, *et al.*, "Vascular endothelial growth factor D (VEGF-D) is a ligand for the tyrosine kinase VEGF receptor 2 (Flt1) and VEGF receptor 3," *Proc. Natl. Acad. Sci. (USA)*, 95(2): 548-553 (1998).

3.5.4.2 **Document D13:** Genbank Accession No. AJ000185, "Vascular endothelial growth factor-D."

3.5.4.3 **Document D14:** International Patent Application No. PCT/US97/14696, filed 21 August 1997 by Ludwig Institute for Cancer Research et al. (WO 98/07832).

3.5.5 These documents disclose Vascular Endothelial Growth Factor-D (VEGF-D) polynucleotides and polypeptides. VEGF-D is a polypeptide whose properties include the ability to bind and stimulate phosphorylation of Flt4 receptor, the stated biological activity of VRP polypeptides in the Genentech application. VEGF-D is encoded by a completely different gene than the gene that encodes VRP, and the VEGF-D gene and protein were not known to exist, and could not have been known to exist, from the Genentech application.

3.5.6 VEGF-D is not VRP: VEGF-D is a different size protein than VRP (354 vs. 419 amino acids) and is encoded by a different human gene. In fact, an alignment of the human VRP and VEGF-D sequences indicated that the molecules share only about 48% amino acid identity, meaning more mismatches than matches. (See **Document D12** at p. 550.) Even though VEGF-D owes nothing to the teachings of the Genentech application, Genentech may assert that VEGF-D protein and cDNA satisfy claim 1 and dependent claims on the basis that VEGF-D "matches" the sequence of Figure 1 of the Genentech application, except for insertional, substitutional, and deletional variations. The claims would be asserted to encompass VEGF-D on the theory that insertional, substitutional, and deletional changes to the VRP sequence taught in the Genentech application are all purportedly within the definition of "human VRP" in the application.

3.6 Inadequate explanation of VRP activity and polypeptides which possess VRP activity.

- 3.6.1 The Genentech application provides inadequate support for at least claims 6-7, 9-14, 19, and 23-28, in that these claims purport to define a genus of biologically active VRP proteins (or polynucleotides encoding the biologically active VRP, vectors, or host cells) with reference to particular amino acid subsequences (e.g., Figure 1, residues 1-29 or 1-137 or -20 to 29 or -20 to 137) that are insufficient to confer VRP biological activity.
- 3.6.2 The Genentech application defines VRP biological activity as the ability to bind and stimulate phosphorylation of a Flt4 receptor. (See analysis in paragraphs 2.2.1.2 and 5.9-5.9.3, repeated by reference.)
- 3.6.3 Significant scientific and patent literature have been published in which scientists have examined the portion of the VRP sequence that is required for binding and stimulating phosphorylation of VRP. (See, e.g., **Document D15:** Joukov *et al.*, "Proteolytic Processing regulates receptor specificity and activity of VEGF-C," *EMBO J.*, 16(13): 3898-3911 (1997); and **Document D16:** International Patent Application No. PCT/US98/01973, filed on 2 February 1998 by Ludwig Institute for Cancer Research et al. (WO 98/33917)). These documents provide scientific evidence that a fragment of VRP lacking at least amino acids -20 to 93 of the VRP sequence of the Genentech application (Figure 1) can bind and stimulate Flt4, suggesting that these amino acids are unnecessary for Flt4-binding and Flt4-phosphorylation activity. The documents provide evidence that the residues necessary for Flt4 binding and phosphorylation are found within approximately amino acids 93-193 of the VRP sequence. The evidence developed through experimental research by non-Genentech scientists indicates that VRP residues 1-29 or 1-137 or -20 to 29 or -20 to 137, recited in the claims for defining biologically active human VRP, are neither necessary nor sufficient (as a group) to confer the stated activity.
- 3.6.4 The Genentech application provides no evidence of its own that residues 1-29 or 1-137 or -20 to 29 or -20 to 137 confer Flt4-binding or Flt4-phosphorylation activity. These recited residues were apparently selected not because the inventors had

stimulate Flk1. (See, e.g., **Document D15**: Joukov *et al.*, "Proteolytic Processing regulates receptor specificity and activity of VEGF-C," *EMBO J.*, 16(13): 3898-3911 (1997); and **Document D16**: International Patent Application No. PCT/US98/01973, filed on 2 February 1998 by Ludwig Institute for Cancer Research et al. (WO 98/33917)). This discovery that Flk-1 can act as a second receptor (for VRP fragments) is directly contrary to the teachings in the Genentech application, even though fragments of the VRP sequence taught in the Genentech application are apparently intended to constitute VRP (according to the definition of "VRP" in the application).

- 3.7.5 Thus, the claims that recite the genus of VRP receptors find inadequate support in the application, which fails to identify at least one receptor for a VRP fragment.

C. Conclusion

- 3.8 Based on the foregoing analysis, I would conclude that at least claims 1-4, 6-7, 9-17, 19-20, and 22-28 lack adequate support in the Genentech application.

Claims Not Fairly Based

A. Introduction

- 4.1 Through my involvement in this matter, it is my understanding that Australian patent law includes a "fair basis" requirement that focuses on whether an invention as claimed is commensurate with the disclosure in an application. It was explained to me that a claim whose scope goes beyond the disclosure of the description found in the specification (*i.e.*, a claim to an invention for which there is no real and reasonably clear disclosure) is not fairly based, and should not be granted. I was told that "fair basis" is a fact-specific inquiry that must be made on a case-by-case basis and with consideration of the common general knowledge in the field(s) of the invention. However, I was told that certain guiding principles/inquiries are relevant to any fair basis analysis:

- 4.1.1 For example, one line of inquiry focuses on whether or not the alleged invention as claimed is broadly described in the specification.

- 4.1.2. Another inquiry is whether or not there is anything in the specification which is inconsistent with the alleged invention as claimed.
- 4.1.3. Another inquiry is whether or not the claim includes as a characteristic of the invention a feature as to which the specification is wholly silent.
- 4.1.4. Speculative claims that seek protection well beyond the consideration given by the specification in its description of the invention are properly objected to for lack of fair basis. (The concept of "consideration given by the specification" is a concept relating to the contribution that a patent applicant gives to the public through the novel teachings in a patent application, in exchange for patent rights that the applicant receives from the public.) This inquiry is particularly relevant when a claim is broad, the ambit of the claim is indeterminate, and the field claimed is largely unexplored.
- 4.1.5. Claims that are open-ended and so broad as to cover processes or products unrelated to the process or product actually disclosed in the specification are objectionable for lack of fair basis.
- 4.1.6. If there is some feature in a claim to which no reference is made in the body of the specification, or if a claim is not limited by its terms to what the patentee has stated in the body of the specification to be the embodiment of the invention, then the claim is objectionable for lack of fair basis.
- 4.2. I was asked to review the Genentech application, the prosecution history, related documents published by Genentech' scientists and others, and the state of the common general knowledge at the time of filing, with the preceding guidelines in mind, and provide a scientific analysis relevant to the question of whether or not claims in the Genentech application are fairly based on the specification. My analysis above relating to insufficiency of the claims is relevant to this section, and is incorporated by reference. Additional particulars of my analysis follow.

B. Analysis

4.3. Upon careful consideration, I would conclude that at least claims 1-7, 9-15, and 28-38 (as well as claims which depend therefrom) of the Genentech application are not fairly based on the matter described in the specification to the extent that these claims: (a) can be interpreted to encompass an infinite number of deletional, insertional, or substitutional variants for which there is no description in the specification; or (b) can be interpreted to read on other growth factors bearing some relationship to VEGF (or polynucleotides encoding them) that exist in nature and were discovered by others and that are not identified in the specification and owe nothing to the teaching of the alleged invention; or (c) purport to define a polypeptide having a particular biological activity with respect to particular amino acid subsequences that have not been shown to confer the activity and do not confer the stated activity. It would appear that these claims represent an attempt to capture all possible solutions to a goal of providing a Flt4 ligand, even though the claims are supported by a much more limited teachings.

4.3.1 Claim 1 of the Genentech application recites, "Isolated biologically active human VEGF-related protein (VRP) containing at least 265 amino acids having the ability to bind and stimulate phosphorylation of a Flt4 receptor." Thus, claim 1 contains no limitation that is explicitly directed to a particular amino acid sequence, such as the VRP amino acid sequence taught in Figure 1 of the Genentech application. At least dependent claims 2-5, 9-15, and 23-28 contain no further limitation specifically directed to a particular sequence.

4.3.2 The Genentech application purports to include deletional, insertional, and substitutional variants within the definition of "human VRP." (See analysis in paragraph 2.2.1.1, repeated here by reference.) To the extent that Genentech asserts that variants not found in humans are within the definition of "human

VRP,"⁴ the claim encompasses a potentially infinite number of deletional, insertional, or substitutional variants, none of which are described in the specification.

4.3.3 At least two naturally-occurring classes of proteins have been described in the literature which bring to light the discrepancy between the scope of what the Genentech application has claimed, and the scope of what the application actually discloses: non-human forms of VEGF-C, and human polypeptides encoded by genes other than the VRP gene.

4.3.3.1 For example, **Document D16**, International Patent Application No. PCT/US98/01973, filed on 2 February 1998 by Ludwig Institute for Cancer Research et al. (WO 98/33917), discloses sequences of murine and quail proteins (identified as "VEGF-C") that have significant sequence similarity to the VRP sequence in Figure 1 of the opposed patent. (See **Document D16** at Figures 5 & 10, for example.) At least the murine VEGF-C was shown to be a potent inducer of Flt4 (VEGFR-3) phosphorylation. (See **Document D16**, Example 26.) These proteins could be characterized as variants of the VRP sequence taught in Figure 1 of the Genentech patent application, in which a number of the VRP amino acids have been added, deleted, or replaced by other amino acids. However, these sequences owe nothing to the teachings of the

⁴ As set forth in paragraphs 5.4-5.4.3 relating to clarity, repeated here by reference, it is not clear whether the claims could be asserted to encompass non-human VRPs that were discovered by others and owe nothing to the specification of the Genentech application.

Genentech patent application. These sequences were discovered by other scientists working independently.⁵

4.3.3.2 Subsequent to the filing of the Genentech application, researchers who are not the inventors of the Genentech application have discovered at least one other human growth factor ("VEGF-D") that binds and stimulates phosphorylation of F1t4 receptor. (See discussion of VEGF-D at paragraphs 3.5.4-3.5.6, above, repeated here by reference.) VEGF-D has a different amino acid sequence from VRP and is encoded by a different human gene than the gene which encoded VRP taught in Figure 1 of the Genentech application. Although VEGF-D owes nothing to the specification of the Genentech application, Genentech might assert that the VEGF-D protein and cDNA satisfy claim 1 and dependent claims on the basis that VEGF-D matches the sequence of Figure 1 of the Genentech application, except for insertional, substitutional, and deletional variations, all of which are purportedly within the scope of the application's definition of "human VRP."

4.3.4 A third example is provided by the fact that the claims supposedly include VRP proteins (and polynucleotides) as large as 450 amino acids (codons) in length. As I explain in detail in paragraphs 3.2-3.2.2, repeated here by reference, the Genentech application teaches only a single VRP sequence that is only 419 amino acids in length. The idea of VRP as large as 450 amino acids is apparently nothing more than an unsolved goal.

⁵ The analysis in this paragraph is inapplicable if claim 1 is interpreted to cover only those polypeptides which are naturally expressed in human beings (due to the word "human" in claim 1).

4.3.5 The discrepancy between claim scope and supporting scientific disclosure is further exemplified by analysis of the biology behind Flt4 receptor binding and stimulation. Claims 6-7, 9-14, 19, and 23-28, at least, supposedly define a genus of biologically active VRP proteins (or polynucleotides encoding the biologically active VRP, vectors, or host cells) with reference to particular amino acid subsequences (*e.g.*, Figure 1, residues 1-29 or 1-137 or -20 to 29 or -20 to 137) that are insufficient to confer the specified biological activity of VRP (namely, the ability to bind and stimulate phosphorylation of a Flt4 receptor). I provided an annotated analysis of the residues required for Flt4 binding in paragraphs 3.6-3.6.5, above, which I repeat here by reference.

4.4 Another discrepancy between the scope of the claims and the teachings of the Genentech patent application is evident with respect to certain claims that pertain to receptor inhibition using biologically active VRP. In particular, claims 12 and 13 are directed to a method of using a biologically active VRP protein (as defined in earlier claims) to treat a dysfunctional state characterised by lack of inhibition of a VRP receptor. Treatment of a dysfunctional state characterised by lack of inhibition of a VRP receptor would require a therapeutic that inhibits the VRP receptor. However, the Genentech application provides no description of how to use biologically active VRP to inhibit VRP receptors. According to the application's stated definition for biological activity (page 5, last paragraph), VRP would be expected to aggravate a dysfunctional state characterized by lack of inhibition of a VRP receptor, because the VRP would further stimulate the receptor, rather than inhibit it.

4.5 A similar logic applies to claim 22, which is directed (in part) to a method of using a VRP antagonist to treat a dysfunctional state characterised by excessive inhibition of a receptor for VRP. The treatment of a dysfunctional state characterised by excessive inhibition of a VRP receptor would presumably require a therapeutic that activates the receptor, and it is unclear how a VRP antagonist would activate a VRP receptor and alleviate a dysfunctional state characterised by excessive inhibition of a VRP receptor. Since biologically active VRP stimulates VRP receptors (by definition), a VRP antagonist would prevent receptor activation, and thereby aggravate a

dysfunctional state characterized by excessive inhibition (i.e., insufficient activation) of the receptor.

- 4.6 Another discrepancy exists between the scope of claim 22 and its underlying support. Claim 22 is directed (in part) to a method of treating "Kaposi's [sic] sarcoma." However, there is no scientific or medical reasoning or evidence provided in the Genentech application for believing that the alleged method of treatment would be beneficial for Kaposi's sarcoma.
- 4.7 Another discrepancy exists between the scope of "use" and "method" claims 12-13, 20, and 22, and the underlying support therefor. As explained in paragraphs 3.3-3.3.7.4, repeated here by reference, the Genentech application attempts to claim use of VRP or VRP inhibitors to treat a number of angiogenesis-related disorders, but teaches that VRP does not interact with known blood vessel receptors and instead interacts with the Flt4 receptor whose expression is taught to become restricted to lymphatic endothelia. There is a discrepancy between the biological activity taught for VRP and the dysfunctional states that the application indicates can be treated.
- 4.8 Another discrepancy between the scope of the claims and the teachings in the patent application is evident from Section 2 of this declaration, in which I describe why many claims are not novel over the prior art. An application that attempts to claim an invention that is not novel is attempting to claim more than the inventors truly provided to the public.

Lack of Clarity in the Claims

A. Introduction

- 5.1 I understand from my involvement in these proceedings that Australian patent law includes a "clarity" requirement. I understand that the claims of a patent are the portion that define the invention for which a patentee receives a monopoly, and the clarity requirement is a statutory obligation to state the invention clearly and distinctly in the claims. As part of my analysis of the Genentech application, I was asked to

evaluate whether the claims were clear to a skilled reader. I was told that certain guiding principles are relevant to any clarity analysis, including the following:

5.1.1 that any evaluation of clarity requires reading the claims in the context of the specification as a whole. For example, the specification may define claim terminology directly or aid in understanding claim terminology. My observations below were made while being mindful of the teachings and definitions provided in the specification of the Genentech application.

5.1.2 that another aspect of clarity focuses on internal consistency, *i.e.*, whether the invention defined in the claims is the same invention as that described in the specification. For example, features emphasized in the description, especially those described as critical or essential, should be included in each claim.

5.2 In my study of the Genentech application and its claims, I made several observations relevant to the issue of clarity, which I set forth below.

B. Analysis of the clarity of the claims of the Genentech application.

5.3 Claims 1-4, 9-17, 19-20, and 23-28, at least, lack clarity in that they recite a VEGF related protein (VRP) containing at least up to about 450 amino acids, but the application does not describe any VRP sequence longer than 419 amino acids.

5.3.1 I select this group of claims because dependent claims 2-4 explicitly recite VRP size ranges up to 450 amino acids. Independent claim 1 is apparently intended to be at least as broad as dependent claims 2-4, indicating that claim 1 also is supposed to encompass VRP of at least 450 amino acids. Claims 9-17, 19-20, and 23-28 depend from claims 1-4 without further restricting the length of VRP, indicating that they, too, are intended to encompass up to 450 amino acids..

5.3.2 The longest VRP sequences taught in the Genentech application are 419 amino acids (see, e.g., Figure 1). Thus, the structure of any VRP larger than 419 amino acids is unclear from the Genentech application.

5.4 Claims 1-28 lack clarity insofar as the metes and bounds of "human VEGF Related Protein" or "human VRP" are unclear.

5.4.1 The patent application purports to include deletional, insertional, and substitutional variants within the definition of "human VRP." (See Genentech application at page 5, lines 12-25.) It is unclear from the application whether the applicants intend the genus "human VRP" to encompass only the Figure 1 sequence and variants thereof that occur in human beings (i.e., allelic variants), or whether they intend the genus to cover the human sequence as shown in Figure 1 as well as any biologically active variant whatsoever (e.g., human allelic variants, non-human, naturally occurring VRP's, and synthetic molecules) whose sequence matches the Figure 1 imperfectly due to deletions, insertions, and/or substitutions.

5.4.2 To the extent that the patent applicant would assert that variants not found in humans are within the definition of "human VRP," the claim encompasses a potentially infinite number of deletional, insertional, or substitutional variants, none of which are described in the specification.

5.4.3 Even if the definition of "VRP" is restricted to human proteins, there are no apparent restrictions on the number of deletional, insertional, and substitutional variants within the definition of human VRP. Thus, it is unclear whether "VRP" is intended to read on completely different human proteins, such as VEGF-D, that bind and stimulate phosphorylation of Flt4 but are structurally distinct from the VRP disclosed in the patent application, e.g., in terms of length, amino acid sequence, and human gene of origin. (See my analysis at paragraphs 3.5.4-3.5.6, which I repeat here by reference.)

5.5 Claims 1-28 lack clarity insofar as the structure of a VRP cDNA and protein are unclear.

5.5.1 The claims pertain to VRP protein, polynucleotides, uses thereof, and the like. The chemical structure of the VRP protein and a cDNA (polynucleotide) encoding it are taught in Figure 1.

5.5.2 Figure 1 contains an ambiguity in that the codon "TAT" at codon position 94 of the cDNA encodes the amino acid tyrosine (Y). However, Figure 1 teaches that position 94 of the encoded VRP protein is a threonine (T). Thus, the chemical structure of the VRP cDNA, or VRP protein, or both, is unclear.

5.6 Claims 12-13, at least, lack clarity in that they seem to state that VRP has two diametrically opposed activities.

5.6.1 Claim 12 recites the use of a biologically active VRP protein according to Claims 1-8 for treating a dysfunctional state characterized by *either lack of activation or lack of inhibition* of a receptor for VRP.

5.6.2 It is unclear how biologically active VRP can be an effective medicament to treat both lack of activation and lack of inhibition of a VRP receptor, because activation and inhibition are opposite effects.

5.7 Claims 20 and 22 lack clarity in that they seem to state that VRP antibodies and VRP antagonists each have two, diametrically opposite therapeutic effects.

5.7.1 Claim 20 recites use of an antibody which binds biologically active VRP to treat a dysfunctional state characterized by *either excessive activation or inhibition* of a VRP receptor. Similarly, claim 22 recites a method for treating a dysfunctional state characterized by *either excessive activation or inhibition* of a VRP receptor with a VRP antagonist. (The application identifies VRP antibodies as VRP antagonists).

5.7.2 It is unclear how any VRP antagonist (or a VRP antibody in particular) can be an effective medicament to treat both excessive activation and excessive inhibition of a VRP receptor, because activation and inhibition are opposite effects.

5.8 Claims 1-28 lack clarity in that they purport to define an invention relating to human VRP but also appear to attempt to encompass an infinite set of variants, including VRP from non-human animals, that owe nothing to the teachings of the application.

5.8.1 Claim 1, the sole independent claim, recites "isolated biologically active human VEGF-related protein (VRP) containing at least 265 amino acids having the ability to bind and stimulate phosphorylation of a Flt4 receptor." All other claims depend from claim 1.

5.8.2 The specification teaches essentially one VRP protein and cDNA sequence of human origin (Figure 1).

5.8.3 However, the specification states that "human VRP" is defined as "a polypeptide sequence containing at least residues -20 to 399, inclusive, or residues +1 to 399, inclusive, of the amino acid sequence shown in Figure 1...as well as biologically active deletional, insertional, or substitutional variants of the above sequences having at least 265 amino acids (Specification at page 5, lines 12-25).

5.8.4 It is unclear from the specification whether the deletional, insertional, or substitutional variants must exist in nature in a living human in order for the variants to constitute "human VRP" as recited in the claims. If there is no such requirement, then it is unclear whether or not sequences which are derived from non-human animals and which contain some amino acids that are identical to Figure 1 and others that are deletional, insertional, or substitutional variation are considered "human VRP" (even though they are from non-humans). Likewise, it is unclear whether or not deletional, insertional, or

substitutional variations selected by scientists, which do not exist in any human or animal, are considered "human VRP" within the scope of the claim.

5.9 Claims 1-28 are unclear in their recitation of "biologically active" as a modifying term for VEGF-related protein.

5.9.1 The Genentech application states, "'Biologically active' for the purposes herein means having the ability to bind to, and stimulate the phosphorylation of, the Flt4 receptor." (See page 5, lines 26-27.) Even with this explicit definition, there is some ambiguity, because the next two sentences in the application seem to contemplate stimulation/activation or inhibition of the receptor and receptor-mediated activities. (See page 5, lines 27-30.) Activation and inhibition are generally considered to be opposites. It is unclear whether the applicants intended this continued discussion to be part of the definition of "biologically active."

5.9.2 Unlike other claims directed to "biologically active VEGF-related protein" (e.g., claims 7 and 8) claim 1 explicitly recites "biologically active and also recites "having the ability to bind and stimulate phosphorylation of a Flt4 receptor." It is unclear whether claim 1 is intentionally redundant in its recitations of "biologically active" and "ability to bind and stimulate phosphorylation of Flt4" or whether the applicants intend the term "biologically active" in claim 1 to have a different, non-redundant meaning.

5.9.3 Similarly, claim 16 is unclear in its recitation of "a biological activity of the protein [of any one of claims 1-8]." By virtue of the indefinite article "a," it is unclear if the applicant intends only the defined biological activity (Flt4 binding and phosphorylation), or whether some other, undefined activity also would satisfy this limitation.

5.10 Claim 11 is unclear in its recitation of "a cell growth factor other than said protein." The metes and bounds of this term are unclear. The term is potentially broad enough to include oxygen, water, carbohydrates, salts, temperature, and other basic constituents of cell growth. Also, there exist factors that stimulate the growth of some cell types and inhibit the growth of other cell types, and it is unclear whether or not such factors would constitute "a cell growth factor other than said protein." If "cell growth factor other than said protein" is intended to refer to cell growth factors that are specific to cells that express VRP receptors, then it is unclear what, if any, growth

AUSTRALIA

Patents Act 1990

IN THE MATTER OF Australian Patent
Application Serial No. 710696 by Genentech,
Inc.

-and-

IN THE MATTER OF Opposition thereto by
Ludwig Institute for Cancer Research

THIS IS Exhibit 1

referred to in the Statutory Declaration

of Peter Adrian Walton Rogers

made before me *Elizabeth Jane Kennedy*

DATED this

26th

Day of October, 2000

Elizabeth Kennedy

Elizabeth Kennedy
B.A.LLB (Hons) LLM (Melb) SOLICITOR
Southern Health
246 Clayton Road Clayton
A natural person who is a current practitioner within
the meaning of the Legal Practice Act 1996

CURRICULUM VITAE

Peter Adrian Walton ROGERS

Department of Obstetrics & Gynaecology
Monash University
Monash Medical Centre
246 Clayton Road
Clayton Victoria 3168
Australia

PHONE:

+61-3-9594 5370

FAX:

+61-3-9594 5389

EMAIL:

PETER.ROGERS@med.monash.edu.au

HOME:

22 Lucan Street
Caulfield North, Victoria 3161
Australia (Phone: +61-3-9527 7969)

DATE OF BIRTH:

1st September, 1955.

PLACE OF BIRTH:

London, England.

MARITAL STATUS:

Wife Cheryl and two children,
Elizabeth 14 and Gillian 12

CITIZENSHIP:

Australian and British
(Dual Nationality)

QUALIFICATIONS:

1977 BSc (Hons)
1983 PhD

1. EDUCATION

1966 - 1973

Abingdon School, Berkshire, UK
9 O-Levels, 3 A-levels.

September 1974 - June 1977

Liverpool University, U.K. B.Sc. Honours (IIA) in Marine Biology. Title of thesis: A Histological Study of Wound Healing in Plaice (*Pleuronectes platessa*).

2. POSTGRADUATE TRAINING

February 1980 - December 1982

Ph.D. studies, Flinders University, South Australia. Title of thesis: Rat Uterine Microvasculature During the Oestrous Cycle and Early Pregnancy.

March - June 1994

Mini sabbatical leave to work with Professor Steve Smith and Dr Stephen Charnock-Jones in the Department of Obstetrics and Gynaecology at Cambridge University. Studies included development of methods for non-isotopic techniques of in situ hybridisation and an investigation of VEGF expression in endometrium from women with progestin-induced breakthrough bleeding.

March-July 1988

Mini sabbatical leave to work with Prof. Gary Hodgen and Dr Ted Anderson at the Jones Institute Research Laboratories, Eastern Virginia Medical School, Norfolk, Virginia, USA. Studies included the development of a new technique for the isolation and long-term culture of human endometrial endothelial cells.

3. PREVIOUS RESEARCH POSITIONS

1993 - 1995

NH&MRC Senior Research Fellow (levels 4-6), Dept. Obstetrics & Gynaecology, Monash University.

July 1986 - December 1992

Senior Research Fellow Grade 1. Dept. Obstetrics & Gynaecology, Monash University.

1985-1987

Worked on an intermittent basis as a scientific consultant for the company IVF Australia. Duties included advising on the establishment of IVF clinics in the United States, laboratory design and staff recruitment and training. During this period, numerous trips to the United States were made to provide training, technology transfer and assist in the process of opening new IVF clinics.

April 1985 - July 1987

Scientific Director of the Monash IVF Programme.

March 1985 - June 1986

Research Fellow Grade II, Dept. Obstetrics & Gynaecology, Monash University.

March 1983 - March 1985

Research Fellow Grade I, Department of Obstetrics & Gynaecology, Monash University.

December 1977 - December 1979

Research assistant to Dr. B.J. Gannon, Department of Human Morphology, School of Medicine, Flinders University, South Australia.

4. PRESENT APPOINTMENT

June 2000 to present: Director, Centre for Women's Health Research, Dept. Obstetrics & Gynaecology, Monash University

1998 to present: Associate Professor, Dept. Obstetrics & Gynaecology, Monash University

1996 to present: NH&MRC Principal Research Fellow, Dept. Obstetrics & Gynaecology, Monash University

5. COLLABORATIONS

As part of my work with the World Health Organisation Task Force on Long-Acting Systemic Agents for Fertility Regulation I am involved in several collaborative research projects with staff in the Human Reproduction Study Group at the University of Indonesia. The staff that I have the most involvement with are Dr Biran Affandi, Dr Sri Bakti Subakir, Dr Sugito Wonodirekso and Dr Julianto Witjaksono. This work investigates various aspects of endometrial breakthrough bleeding caused by long-term progestin contraception. This collaboration has been funded continuously by the World Health Organisation from 1990 with funds currently committed until the year 2000. I visit Jakarta 2-3 times per year where I am also involved in research training and technology transfer.

I collaborate with a number of people on different components of my research programme, including:

Dr Peter Dockery, University of Cork, Ireland; Morphometric studies on endometrial vasculature.

Dr Hillary Critchley, Edinburgh, UK. Menorrhagia studies.

Dr Chris Murphy, Dept. Anatomy & Histology, University of Sydney, Endometrial ultrastructure.

Dr Steve Stacker, Dr Marc Achen, Ludwig Institute, Melbourne. Various studies on VEGF

Dr Lois Salamonsen, Prince Henry's Institute, Melbourne. Norplant effects on the endometrium.

Prof. John Leeton, Monash IVF. Preparation of recipient endometrium for implantation

Dr Beatrice Susil, Anatomical Pathology, Monash Medical Centre. Endometrial and ovarian pathology.

Dr Euan Wallace, Dept. Obstetrics & Gynaecology, Monash University. Pre-eclampsia studies.

Dr Beverley Vollenhoven, Dept. Obstetrics & Gynaecology, Monash University. Fibroid studies.

Dr Paul Simmons and Dr Ivan Bertonecello, Stem Cell Laboratory, Peter MacCallum Cancer Institute.

Prof John Bertram, Dept of Anatomy, Monash University. Prof Bevyn Jarrot, Dept of Pharmacology, Monash University

"Exogenous hormones and dysfunctional bleeding." NIH, Bethesda, Maryland, USA. May 4-6th, 1992. Invited speaker.

VIIIth World Congress on Human Reproduction, Bali, Indonesia. April 4-9th, 1993. Basic studies on endometrial bleeding in norplant users.

14th Asian and Oceanic Congress of Obstetrics and Gynaecology, Manila, November 14-19th, 1993. Research on progestogen-induced vaginal bleeding: a collaboration between Indonesia and Australia.

31st May 1994; Department of Obstetrics and Gynaecology at Edinburgh University, "Vascular growth in normal and Norplant treated endometrium".

3rd June 1994; Department of Obstetrics and Gynaecology, Queens University of Belfast, "Angiogenesis in endometrial bleeding disorders".

First International Meeting of World Placenta Associations, October 24-28, 1994. Sydney. Invited plenary lecture: Current studies on human implantation.

Eighth Symposium of the Australian and New Zealand Microcirculation Society. Auckland, Feb. 3-5, 1995. Invited lecture: Reproductive angiogenesis.

Second International Symposium on IVF, Seoul, Korea, April 29-30, 1995. Invited lecture, "Maternal age effects on the endometrium."

World Health Organisation sponsored meeting in Bali, October 14-15th, 1995. "Current research on progestin-only contraceptives and endometrial bleeding".

International Ferring Symposium on Function and Dysfunction of the Non-Pregnant Uterus. A Satellite Symposium to the 1997 ESHRE Annual Meeting. Germany, June 19-21, 1997. Title: Endometrial microvascular growth in normal and dysfunctional states".

Group seminar at the Department of Surgery, Harvard University, Boston, USA. 14 August 1997. Title: "Angiogenesis in reproductive tissues".

WHO/NIH Symposium on Steroids and Endometrial Breakthrough Bleeding, May 4-5, 1999. Title:- Growth and regression of the endometrial vasculature.

Gordon Research Conference on Angiogenesis and Microcirculation, August 15-19, 1999. Rhode Island, USA. Chairman and Discussion Leader on Angiogenesis in Reproduction session.

Invitations To Speak In Australia And At National Meetings

Australian Society for Reproductive Biology. Embryo Transfer Satellite Symposium, Adelaide, 25th August 1985. Invited speaker.

Australian and New Zealand Microcirculation Society, Fifth Symposium, Canberra, 10-12th February, 1989. Invited Speaker.

The University of Melbourne, Department of Pharmacology, 26 April 1999. Title:
"Angiogenesis in reproductive tissues".

Institute of Reproduction and Development Symposium, 7-8 May 1999. Title:- "Angiogenesis
in ovarian cancer".

Monash University Department of Anatomy Seminar Series, August 4, 1999. Title:-
Angiogenesis in reproductive tissues".

Awards

Australian Society for Fish Biology. Gilbert P. Whitley Memorial Award for best scientific
presentation by a student. 1980 Annual Meeting.

Fertility Society of Australia, 5th Annual Scientific Meeting, Adelaide, December 1986.
Serono-CSL award for best scientific presentation.

Fertility Society of Australia, 6th Annual Scientific Meeting, Sydney, November 1987.
Merrell-Dow award for best poster presentation.

Australian and New Zealand Microcirculation Society. Best paper by a young scientist at
1989 meeting.

Awards Received By Group Members

Keren Abberton, PhD student. Australian and New Zealand Microcirculation Society. Best
paper by a student at 1997 meeting

Maxine Orre, PhD student. Second Peter Mac Symposium. New Strategies for Cancer
Detection and Therapy. Best poster award, 1997

Caroline Gargett, Postdoc. Tenth Australian and New Zealand Microcirculation Symposium.
Best talk by a young scientist, 1999

Marina Zaitseva, Honours student. The Australian Society for Medical Research. Australian
Vascular Biology Society. Young Investigator Award, 1999.

Caroline Gargett, Postdoc. Australian and New Zealand Microcirculation Society. The DG
Garlic Award 1999.

Caroline Gargett, Postdoc. Australian Society for Reproductive Biology. Junior Scientist
Award 2000.

7. POSTGRADUATE AND UNDERGRADUATE TEACHING

Completed Theses

PhD

1991-1994; Anne Macpherson. Title of Thesis: Endometrial angiogenesis

Regulation of VEGF receptors in human endothelial cells.

Sophie Gohl; Topic of Thesis: Investigation of fibroid and myometrial smooth muscle cell physiology using the cytoscensor.

Lara Gambino; Topic of Thesis: Mechanisms of angiogenesis in human endometrium.

Undergraduate Teaching Experience

At Monash University I give a limited number of lectures to students in the Diploma and Masters of Reproductive Science courses, as well as providing supervision for various assignments and a practical class on immunohistochemistry. In the past I have given occasional lectures to the 5th year medical students, as well as to physiology, anatomy and veterinary students. At Flinders University from 1978-1982 I was heavily involved in running first year biology practical classes, as well as demonstrating anatomy and histology to medical students.

8. ADMINISTRATIVE RESPONSIBILITIES

Community Service: Trustee for the Jean Hailes Menopause Foundation (1988 to present)

In 1988 I became involved with 5 other people in establishing the Jean Hailes Foundation in honour of the life work of Dr Jean Hailes who died in November of that year. The Jean Hailes Foundation is a non-profit organisation specialising in the management of women's health. The Trust under which the Foundation operates, specifies 3 major activities:- clinical services, research, and education, with the latter having a strong focus on health promotion and illness prevention. Since the opening of the Clinic in 1992, the Foundation and its activities have grown at a dramatic rate. In the financial year 1997-1998, the Foundation had a turnover in excess of \$1.7million. As one of five Trustees, I take responsibility for a range of policy and financial issues within the organisation. I have represented the Jean Hailes Foundation in discussions with both State and Federal Health Ministers and the work of the Foundation enjoys strong recognition from both these levels of government. Among the many activities currently on the agenda at the Foundation is the establishment of the Jean Hailes Chair in Women's Health to be established in the Monash University Department of Obstetrics and Gynaecology with funds raised by the Jean Hailes Foundation.

Committee Memberships And Management Contributions

1999 to present	Faculty of Medicine Research Strategic Planning Committee (Sub-committee of the Faculty of Medicine Research Committee)
1996 to present	Chairman, Department of Obstetrics and Gynaecology postgraduate students committee
1995 to present	Department of Obstetrics and Gynaecology Executive and Finance Committee
1992 to present	Company Director for Menoserve Pty Ltd, trading entity for the Jean Hailes Menopause Foundation.
1989 to present	Trustee and Foundation Board member of The Jean Hailes Menopause Foundation Trust.

1988 to present	Scientific Director, Monash IVF Donor oocyte program.
1988 to present	Department of Obstetrics and Gynaecology monthly Academics meetings.
1996 - 1998	Chairman, Monash Medical Centre Animal Experimentation Ethics Committee
1987 - 1998	Member, Monash Medical Centre Animal Ethics Committee
1997	Member, Monash University Animal Welfare Committee
1995 - 1997	Member, Faculty of Medicine B. Med. Sci. Committee
1993 - 1997	Member, Institute of Reproduction and Development Executive.
1993 - 1997	Department of Obstetrics and Gynaecology representative on Monash University Faculty of Medicine Board.
1989 - 1997	Board Member, Monash University Centre for Reproductive Biology
1986 - 1988	Member, Queen Victoria and Monash Medical Centre Animal House Co-ordinating Committee
1987 - 1988	Member, Monash Medical Centre IVF Unit Executive
1985 - 1987	Monash University-IVFA Operations Committee
1984 - 1987	Member of Monash IVF Executive
1984 - 1987	Member of Monash IVF Finance Committee
1985 - 1986	Chairman, Obstetrics & Gynaecology Animal Ethics Committee
1984 - 1985	Obstetrics & Gynaecology Representative on University Biomedical Library Committee
1981 - 1982	Postgraduate Representative on Flinders Medical Centre School Board
1981 - 1982	Member. Flinders Medical Centre Audio Visual Advisory Committee
1982	President, Flinders University Sports Association
1980 - 1982	President, Flinders University Underwater Club
1983 - 1986	National Testing Officer, Cave Diving Association of Australia

9. PEER REVIEW AND SCIENTIFIC DISCIPLINE INVOLVEMENT

Refereeing For International Journals And Granting Bodies

I am on the editorial board of the new international journal, Angiogenesis. and have served on the Editorial Board for the Chinese Journal of Physiology. I have acted as an ad hoc referee for a number of scientific journals, including: Journal of Reproduction and Fertility, Biology of Reproduction, Fertility and Sterility, Human Reproduction, Human Reproduction Update, Molecular Human Reproduction, Reproduction Fertility and Development, Journal of Endocrinology and International Journal of Cancer.

I referee grant applications for numerous agencies including National Health and Medical Research Council, Australian Research Council, various Australian Anti Cancer agencies, the Wellcome Foundation, the Health Research Council of New Zealand and the Biotechnology and Biological Sciences Research Council. In February 1999 I was a scientific grant referee for Indonesian Ministry of Education and Culture, Directorate General of Higher Education

Society Memberships

Australian Society for Reproductive Biology

Australian Society for Medical Research

Australian Fertility Society (Foundation member)

Australian & New Zealand Microcirculation Society (Foundation member and President 1997-1998)

American Society for Reproductive Medicine (Formerly The American Fertility Society)
Society for the Study of Reproduction (USA)

Scientific Committee Memberships And Society Offices Held

1998 - 1999	Chairman, Organising committee for WHO/NIH symposium on contraceptives and endometrial bleeding to be held at Monash Medical Centre May 4-5, 1999
1998 - 1999	Chairman, Organising Committee for Institute of Reproduction and Development annual symposium. "Angiogenesis in Reproductive Tissues" to be held at Monash Medical Centre May 7-8, 1999.
1997 - 1998	President, Australia and New Zealand Microcirculation Society
1996 - 1997	Chairman of organising committee for 1997 Australian and New Zealand Microcirculation Society Conference in Melbourne, January 30 - February 1, 1997.
1994	Member of organising committee, Carl Wood Festschrift, "Reproductive medicine beyond 2000".
1994	Convenor, Scientific Program Organising Committee, Australian Society for Medical Research 33rd National Scientific Conference, Melbourne, 27-30 November 1994

1992	Convenor, Victorian ASMR Medical Research Week.
1991	Lecture program organiser, Victorian ASMR Medical Research Week.
1990-1991	Organising committee and session chairman, Australian and New Zealand Microcirculation Society 1991 Scientific Meeting.
1989	Organiser and Chairman, Fertility Society of Australia Embryology Symposium
1985	Organizing Committee, 4th World Congress on IVF, Melbourne, Australia

10. RESEARCH GRANT SUPPORT

I continue to run a group of between 10 and 15 staff and students with 80% of funding being obtained from peer review national and international sources. Over the 5 years, 1994-1998 I attracted approximately \$1.6 million in outside research funds, and my research group published 46 peer review publications, 14 chapters or invited reviews, and 53 conference abstracts.

Research Grants And Funding To Dr. P.A.W. Rogers

1985	Special research grant, Monash University. The role of the uterine microvasculature in early implantation	\$7,500
1985	Special grant from Serono and Commonwealth Serum Laboratories towards the establishment of a departmental histology laboratory	\$28,000
1985	Special grant of equipment towards the development of a high purity water system for IVF application from Millipore Australia	\$20,000
1985	Special grant from Organon towards a technical assistant's salary	\$10,000
1985	Donation from IVF patient towards microscope equipment for histology laboratory	\$6,000
1986-1988	NH&MRC. In vivo and ultrastructural studies on implantation and uterine receptivity	\$116,285
1986	William Buckland Foundation. Histological investigation of the anterior eye chamber embryo implantation model	\$3,060
1986	Special Research Grant, Monash University. Ultrastructural studies of human endometrium relating to uterine receptivity for implantation	\$5,000
1987	NH&MRC. Application for an electron microscope for studies in reproduction. Chief Investigator: Dr. A. Trounson, Senior Investigators: Drs. P. Rogers, A. Walker, H. Sathananthan	\$87,000

1987	Clive and Vera Ramaciotti Foundation. Shared equipment for measuring red blood cell velocity from videotape records of intravital blood flow in the micro-circulation. (Other Chief Investigators: Prof. B. Gannon, Prof. P. O'Brien)	\$10,000
1987	William Cook Australia Pty. Ltd. Technical salary support	\$5,000
1987	R.A. Hallenstein Charitable Trust. The role of uterine factors in human infertility	\$1,000
1988	Brockhoff Foundation. Ultrastructural studies on human post-menopausal endometrium following steroid replacement therapy	\$26,144
1988	R.A. Hallenstein Charitable Trust	\$3,000
1989-1991	NH&MRC. Molecular changes in the plasma membrane of human uterine epithelial cells	\$90,150
1989	CONRAD. Isolation and culture of human endometrial endothelial cells	\$18,797
1989	R. A. Hallenstein Charitable Trust	\$3,000
1989	Monash Research Fund. Endometrial response to different postmenopausal hormone replacement therapies	\$2,550
1990	Monash Medical Centre. Endometrial microvascular response to oestrogen	\$3,000
1990	Sunshine Foundation. Endometrial microvascular response to oestrogen	\$5,000
1990	Perpetual Executors and Trustees. Endometrial microvascular response to oestrogen	\$5,000
1990	Helen Schutt Foundation. Endometrial vascular response to oestrogen	\$5,000
1990	Infertility Medical Centre. Correlation of endometrial histology, morphometry and ultrasound appearance with superovulation protocol for IVF	\$12,000
1990-1993	World Health Organisation. The aetiology of increased endometrial bleeding in Norplant users; the role of local factors	\$300,000
1990	Buckland Foundation. Endometrial vascular response to oestrogen	\$5,000

1990	R. A. Hallenstein Charitable Trust. Endometrial vascular response to oestrogen	\$3,000
1990	Collier Charitable Fund. Equipment grant to purchase a microhysteroscope for O&G Dept	\$2,500
1991-1993	NH&MRC. A study of endometrial microvascular function during embryo implantation	\$219,663
1991-1993	NH&MRC. The role of local endometrial factors in perimenopausal uterine bleeding	\$190,937
1991	Helen M. Schutt Trust. Equipment grant to purchase a microhysteroscope for O&G Dept	\$3,000
1991	William Angliss Charitable Fund. Equipment grant to purchase a microhysteroscope for O&G Dept	\$2,000
1992	Collier Charitable Fund. Purchase of 2 chemotaxis chambers	\$2,250
1992	Sunshine Foundation, Equipment grant to purchase a set of objective lenses for a new microscope	\$4,828
1993-1997	NH&MRC. Local regulation of endometrial angiogenesis (Senior Research Fellowship)	\$211,745
1993-1995	NH&MRC. Local mechanisms influencing endometrial function in menorrhagia	\$189,753
1993	Collier Charitable Trust. Purchase of image scanner	\$2,750
1993	ANZ Trustees. Purchase of Zeiss microscope	\$10,000
1993	ANZ Trustees. Menstrual disorders, Impact on womens health	\$10,000
1994-1996	World Health Organisation. Local control of the endometrial vasculature in women receiving long-term progestogen contraception	\$254,000
1994-1995	Anti-Cancer Council of Victoria. Role of vascular endothelial growthfactor in ovarian tumour angiogenesis	\$64,000
1994-1995	Slezak Trust (Through The Jean Hailes Menopause Foundation). Control of vascular growth in ovarian cancer	\$102,000
1994	The Arthur Wilson Memorial Scholarship in Obstetrics & Gynaecology. Spiral arteriole development in menorrhagia (Awarded to Dr Jacoba Kooy, postdoc in group)	\$20,000

1994	British Council Travel Grant. Travel funds for UK sabbatical	\$2,299
1994	Wellcome-Ramaciotti Research Travel Grant.	\$1,500
1994	William Buckland. The mechanism of action of Danazol in the regression of human endometrium and microvascular density. (Awarded to Dr. Tseng Lau, postdoc in group).	\$12,750
1995-1997	NH&MRC. Uterine microvascular-embryo interactions during implantation in the rat	\$163,818
1996-1998	The Jean Hailes Menopause Foundation. Research support grant.	\$15,000
1997	The Royal Australian College of Obstetrics & Gynaecologists. Arthur Wilson Memorial Scholarship in Obstetrics & Gynaecology.	\$20,000
1996-2000	NH&MRC. Endometrial angiogenesis (Principal Research Fellowship Grant)	\$958,883
1998-2000	World Health Organisation. Investigation of local mechanisms associated with progestin induced endometrial bleeding	\$252,392
1998	Appel Family Bequest. Factors influencing fibroid growth and Development.	\$12,500
1998	Contract Research with Kryocor Pty Ltd. Funds to establish endothelial Cell laboratory	\$42,000
2000-2004	NH&MRC. Endometrial angiogenesis. Principal Research Fellowship grant.	\$1,175,000

11. BRIEF OUTLINE OF PREVIOUS, CURRENT AND PROPOSED RESEARCH EXPERIENCE

1977-1979

Work as Research Assistant in laboratory of Dr B Gannon, Dept. Human Morphology, Flinders University. Projects included histology, ultrastructure, morphometry and vascular corrosion casting studies on the microvasculature of the mammalian small intestine, lungfish gills and tuna gills.

1980-1983

PhD studies on rat uterine microvascular structure and function. Techniques included ultrastructure, vascular corrosion casting, morphometry and in vivo microscopy.

1983-1985

Postdoctoral appointment with Monash IVF. During this period I gained expertise in all aspects of human IVF, including embryology, andrology, endocrinology, ovulation induction and cryopreservation. In addition, I obtained independent research funding for staff and equipment to establish my own basic endometrial/implantation research group.

1985-1987

Scientific Director, Monash IVF. Duties included overseeing and co-ordinating the scientific research projects associated with the Monash IVF programme, running the embryology laboratory, maintaining quality control and ensuring an adequate pregnancy rate, recruiting, training and supervising embryology staff (the IVF programme employed 6 embryologists at this time), preparing and participating in public information seminars and debates, and preparing submissions for government committees reviewing the legislation controlling and the funding for IVF in Australia. During this period I also ran my own basic research group studying endometrial function and implantation, and in 1986 obtained project funding from NH&MRC for studies on embryo implantation.

1988-1992

My primary activities during this period were obtaining funding for, and running, a number of basic research projects relating to menstruation, the pathology of abnormal uterine bleeding, embryo implantation, endometrial structure and function and the endometrial microvasculature. Specific research projects included; work on endometrial microvascular function in women using long-term progestin contraceptive implants, factors that cause increased endometrial bleeding in peri-menopausal women, and the response of the rodent endometrial microvasculature to the implanting embryo.

1993-1996

Major research interests included endometrial physiology, microvascular function, angiogenesis, and embryo implantation as well as a number of relevant gynaecological disorders including menorrhagia, endometriosis, peri-menopausal problems and contraceptive induced break-through bleeding. Developed considerable expertise in immunohistochemistry methodology.

1997- to present

My research interests continued to develop within the broad field of reproductive biology and angiogenesis. Specific interests include understanding of the mechanisms and regulation of physiological angiogenesis in reproductive tissues during the menstrual cycle, and alterations in the angiogenic process that occur in tumour tissues. A number of collaborations with clinical investigators within and associated with the Department of Obstetrics and Gynaecology include work on topics such as leiomyoma, interstitial cystitis, endometriosis, menorrhagia, and pre-eclampsia. More recently I have established an endothelial cell laboratory in conjunction with an industry partner with various projects investigating macro and micro vascular endothelial cell biology.

The Future

I will continue to develop the expertise within my group and the Obstetrics & Gynaecology Department to pursue basic studies in areas such as angiogenesis, endothelial cell biology, and microvascular function. More clinically oriented studies will continue into diseases such as

reproductive cancers, menorrhagia, endometriosis, leiomyoma, interstitial cystitis, and pre-eclampsia. We have developed significant expertise in techniques such as immunohistochemistry, image analysis and tissue culture (including isolation and culture of microvascular endothelial cells, and a range of primary cell separation and culture techniques). Another major strength is our ability to liaise with a large number of clinical staff both in Melbourne and overseas. This gives us rapid access to large collections of well characterised clinical material for our research studies. We also have capabilities in a range of other methodologies, including in situ hybridisation, PCR, Northern, RPA and various biochemical techniques. The development and increasing contribution of Dr Caroline Gargett as a postdoc within the group is seen as a significant plus for the future. Similarly, the recent addition of Dr Euan Wallace as a specialist obstetrician and researcher to the Department has opened up major new opportunities for collaboration. At the present time these are being pursued in the form of a major research proposal on pre-eclampsia.

REFEREED PUBLICATIONS

1. GANNON BJ, ROGERS PAW, O'BRIEN PE (1980). Two capillary plexuses in human intestinal villi. *Micron* 11:447-448.
2. GANNON BJ, GORE RW, ROGERS PAW (1981). Is there an anatomical basis for a vascular counter current mechanism in rabbit and human intestinal villi? *Biomed Res* 2 suppl. 235-241.
3. SMITH MJ, ROGERS PAW (1981). Skulls of Bettongio lesueur (Mammalia: Macropodidae) from a cave in the Flinders Ranges, South Australia. *Trans Roy Soc Sth Aust* 105:217.
4. ROGERS PAW, GANNON BJ (1981). The vascular and microvascular anatomy of rat uterus during the oestrous cycle. *Aust J Exp Biol Med Sci* 59:667-679.
5. ROGERS PAW, MURPHY CR, GANNON BJ (1982). Changes in the spatial organization of the uterine vasculature during implantation in the rat. *J Reprod Fert* 65:211-214.
6. ROGERS PAW, MURPHY CR, GANNON BJ (1982). Absence of capillaries in the endometrium surrounding the implanting rat blastocyst. *Micron* 13:373-374.
7. ROGERS PAW (1982). The vascular and microvascular anatomy of the gill of the southern rock lobster *Jasus novaehollandiae*. *Aust J Mar Freshw Res* 33:1017-1028.
8. ROGERS PAW, MURPHY CR, ROGERS AW, GANNON BJ (1983). Capillary patency and permeability in the endometrium surrounding the implanting rat blastocyst. *Int J Microcirc : Clin Exp* 2:241-249.
9. ROGERS PAW, GANNON BJ (1983). The microvascular cast as a 3-dimensional tissue skeleton. Visualization of rapid morphological changes in tissues of the rat uterus. *J Microsc* 131:241-247.
10. ROGERS PAW, MURPHY CR, SQUIRES KR, MacLENNAN AH (1983). The effects of relaxin on the intra-uterine distribution and antimesometrial positioning and orientation of rat blastocysts before implantation. *J Reprod Fert* 68:341-435.
11. ROGERS PAW (1983). Rat uterine microvasculature during the oestrous cycle and early pregnancy. Ph.D. Thesis. Flinders University of South Australia, Bedford Park, South Australia.
12. GANNON BJ, BROWNING I, O'BRIEN P, ROGERS PAW (1984). Mucosal microvascular architecture of the fundus and body of human stomach. *Gastroenterology* 86:866-875.
13. ROGERS PAW (1984). In vitro fertilization : a review. *Aust J Med Lab Sci* 5:5-13.

14. ROGERS PAW, TROUNSON AO (1984). In vitro fertilization: current state of the art. *International Medicine* 4:2-5.
15. WOOD C, DOWNING B, TROUNSON A, ROGERS P (1984). Clinical implications of developments associated with the technique of in vitro fertilization. *Brit Med J* 289:978-980.
16. TROUNSON A, ROGERS PAW, LUTJEN PJ, SATHANANTHAN H, HOPPEN H-O, YATES C, DE KRETZER D, LEETON J, HEALY D, WOOD C (1985). Human in vitro fertilization and embryo transfer. *Acta Obstet Gynaec Jpn* 37:1231-1240.
17. ROGERS PAW, MILNE BJ, TROUNSON AO (1986). A model to show uterine receptivity and embryo viability following ovarian stimulation for in vitro fertilization. *J Vitro Fert Embryo Transfer* 3:93-98.
18. TROUNSON A, HOWLETT D, ROGERS P, HOPPEN H-O (1986). The effect of progesterone supplementation around the time of oocyte recovery in patients superovulated for in vitro fertilization. *Fertil Steril* 45:532-535.
19. KOVACS GT, ROGERS P, LEETON J, TROUNSON AO, WOOD C, BAKER HWG (1986). In vitro fertilization and embryo transfer - prospects of pregnancy by life table analysis. *Med J Aust* 144:682-683.
20. ROGERS P, MOLLOY D, HEALY D, McBAIN J, HOWLETT D, BOURNE H, THOMAS A, WOOD C, JOHNSTON I, TROUNSON A (1986). Cross-over trial of superovulation protocols from two major in vitro fertilization (IVF) centres. *Fertil Steril* 46:424-431.
21. OKAMOTO S, HEALY DL, HOWLETT DT, ROGERS PAW, LEETON JF, TROUNSON AO, WOOD EC (1986). An analysis of plasma estradiol concentrations during clomiphene citrate - human menopausal gonadotropin stimulation in an in vitro fertilization-embryo transfer program. *J Clin Endocrinol Metab* 63:736-740.
22. KOVACS GT, SHEKLETON P, LEETON J, ROGERS P, WOOD C, BUTTERY B, RENOU P, DAVIDSON G (1987). Ectopic tubal pregnancy following in vitro fertilization and embryo transfer under ultrasonic control. *J Vitro Fert Embryo Transfer* 4:124-126.
23. LENZ S, LEETON J, ROGERS P, TROUNSON A (1987). Transfundal transfer of embryos using ultrasound. *J Vitro Fert Embryo Transfer* 4:13-17.
24. OKAMOTO SH, HEALY DL, MORROW LM, ROGERS PAW, TROUNSON AO, WOOD EC (1987). Predictive value of plasma human chorionic gonadotrophin-subunit (β -HCG) in diagnosing ectopic pregnancy following in vitro fertilization and embryo transfer (IVF-ET). *Brit Med J* 294:667-670.
25. CHAN CLK, CAMERON IT, FINDLAY JK, HEALY DL, LEETON JF, LUTJEN PJ, RENOU PM, ROGERS PA, TROUNSON AO, WOOD EC (1987). Oocyte donation and

IVF for hypergonadotropic hypogonadism: clinical state of the art. *Obstet Gynecol Survey* 42:350-362.

26. MURPHY CR, ROGERS PAW, LEETON J, HOSIE M, BEATON L, MACPHERSON A (1987). Surface ultrastructure of uterine epithelial cells in women with premature ovarian failure following steroid hormone replacement. *Acta Anat* 130:348-350.
27. KOLA I, TROUNSON A, DAWSON G, ROGERS P (1987). Trippronuclear human oocytes: altered cleavage patterns and subsequent karyotype analysis of embryos. *Biol Reprod* 37:395-401.
28. LEETON J, ROGERS P, CARO C, HEALY D, YATES C (1987). A controlled study between the use of gamete intrafallopian transfer (GIFT) and in vitro fertilization and embryo transfer in the management of idiopathic and male infertility. *Fert Steril* 48:605-607.
29. ROGERS PAW, MACPHERSON AM, BEATON LA (1988). Embryo implantation in the anterior chamber of the eye : effects on uterine allografts and the microvasculature. *Ann NY Acad Sci* 541:455-464
30. ROGERS PAW, MACPHERSON AM, BEATON L (1988). Vascular response in a non-uterine site to implantation-stage embryos in the rat and guinea-pig: in vivo and ultrastructural studies. *Cell Tissue Res* 254:217-224.
31. CAMERON IT, ROGERS PAW, SALAMONSEN LA, HEALY DL (1988). The endocrine requirements for implantation and early embryogenesis. *J Reprod Fert* 36:17-25.
32. ROGERS PAW (1988) In vitro fertilization statistics. *Med. J. Aust.* 148:206.
33. KOVACS GT, KING C, ROGERS P, WOOD C, BAKER HWG, YATES C (1989). In vitro fertilization, a practical option after failed artificial insemination with donor semen. *Reprod. Fertil. Dev.* 1:383-386.
34. ROGERS PAW, MURPHY CR, LEETON J, HOSIE M, BEATON L, MACPHERSON A (1989). An ultrastructural study of human uterine epithelium from a patient with a confirmed pregnancy. *Acta Anat* 135:176-179.
35. ROGERS PAW, MURPHY CR, CAMERON IK, LEETON J, HOSIE M, BEATON L, MACPHERSON A (1989). Uterine receptivity in women receiving steroid replacement therapy for premature ovarian failure: ultrastructural and endocrinological parameters. *Human Reprod.* 4:349-354.
36. CAMERON IT, ROGERS PAW, CARO C, HARMAN J, HEALY DL, LEETON JF (1989). Oocyte Donation: a review. *Brit J Obstet Gynaecol* 96:893-899.

37. LEETON J, ROGERS P, CAMERON I, CARO C, HEALY D. (1989). Pregnancy results following embryo transfer in women receiving low-dosage variable-length estrogen replacement therapy for premature ovarian failure. *J. IVF and ET.* 6:232-235.
38. MACPHERSON AM, ROGERS PAW, BEATON LA (1989). Vascular response in a non-uterine site to implantation stage embryos following xenogeneic transfers between the rat, mouse and guinea-pig. *Cell Tiss. Res.* 258:417-423.
39. CAMPO SM, ROGERS P, FINDLAY JK (1989). Sex hormone binding globulin in human follicular fluid and serum at the time of oocyte recovery. *Reprod. Fertil. Dev.* 1:289-297.
40. MURPHY CR, ROGERS PAW, KOVACS G, HAILES J, HOSIE M, BEATON L (1990). Post-Menopausal hormonal steroid therapy evaluated by scanning electron microscopy of the uterine epithelium. *Acta Anat.* 138:364-366.
41. ROGERS PAW, MACPHERSON A. (1990) In vivo microscopy of the rat endometrial subepithelial capillary plexus during the oestrous cycle and following ovariectomy. *J. Reprod. Fert.* 90:137-145.
42. ROGERS PAW, POLSON D, MURPHY CR, HOSIE M, SUSIL B, LEONI M. (1991) Correlation of endometrial histology, morphometry and ultrasound appearance following different stimulation protocols for IVF. *Fertil. Steril.* 55:583-587.
43. LEETON J, ROGERS P, KING C, HEALY D. (1991) A comparison of pregnancy rates for 131 donor egg transfers using either a sequential or fixed regime of steroid replacement therapy. *Hum. Reprod.* 6:299-301.
44. HOSIE MJ, MURPHY CR, ROGERS PAW, DWARTE DM. (1991) Morphometric comparison of uterine glandular epithelium in the early secretory phase from patients treated with different superovulatory drugs on an IVF programme. *Acta Anat.* 142:174-178.
45. SALAMONSEN LA, BUTT AR, MACPHERSON AM, ROGERS PAW, FINDLAY JK. (1992) Immunolocalization of the vasoconstrictor endothelin in human endometrium during the menstrual cycle and in umbilical cord at birth. *Am. J. Obstet. Gynecol.* 167:163-167.
46. ROGERS PAW, MURPHY CR, LEETON J, HOSIE M, BEATON L. (1992) Turner's syndrome patients lack tight junctions between uterine epithelial cells. *Hum. Reprod.* 7:883-885.
47. ROGERS PAW, MACPHERSON A, BEATON L (1992) Reduction in endometrial neutrophils in proximity to implanting rat blastocysts. *J. Reprod. Fert.* 96:283-288.
48. ROGERS PAW (1992) The early endometrial microvascular response during implantation in the rat. *Reprod. Fertil. Dev.* 4:261-264.
49. ROGERS PAW, MURPHY CR (1992) Morphometric and freeze fracture studies of human endometrium during the peri-implantation period. *Reprod. Fertil. Dev.* 4:265-269.

50. MURPHY CR, ROGERS PAW, LEETON J, HOSIE M, BEATON L (1992) Tight junctions of human uterine epithelial cells change during the menstrual cycle: A morphometric study. *Acta Anat.* 144:36-38.
51. ROGERS PAW, ABBERTON KM, SUSIL B (1992) Endothelial cell migratory signal production by human endometrium during the menstrual cycle. *Hum. Reprod.* 7:1061-1066.
52. SUBAKIR SB, ABBERTON KM, ROGERS PAW (1992) Endometrial angiogenic response in patients with menorrhagia. *Med. J. Univ. Indonesia* 1:71-73.
53. TAWIA SA, ROGERS PAW (1992) In vivo microscopy of the subepithelial capillary plexus of the endometrium of rats during embryo implantation. *J. Reprod. Fert.* 96:673-680.
54. POLSON DW, KRAPEZ JA, LEETON JF, ROGERS PA (1992) Randomized controlled study to assess the benefits of vaginal progesterone in an IVF/GIFT programme. *Eur. J. Obstet. Gynaecol.* 46:35-38.
55. AU CL, ROGERS PAW (1993) Immunohistochemical staining of von Willebrand factor in human endometrium during normal menstrual cycle. *Hum. Reprod.* 8:17-23.
56. TAWIA SA, BEATON LA, ROGERS PAW (1993) Immunolocalization of the cellular adhesion molecules, intercellular adhesion molecule-1 (ICAM-1) and platelet endothelial cell adhesion molecule (PECAM), in human endometrium throughout the menstrual cycle. *Hum. Reprod.* 8:175-181.
57. ROGERS PAW. (1993) Uterine receptivity. *Reprod. Fertil. Dev.* 4:645-652.
58. ROGERS PAW, AU CL, AFFANDI B (1993) Endometrial microvascular density during the normal menstrual cycle and following exposure to long-term levonorgestrel. *Hum. Reprod.* 8:1396-1404.
59. CRITCHLEY HOD, BAILEY DA, AU CL, AFFANDI B, ROGERS PAW (1993) Immunohistochemical sex steroid receptor distribution in endometrium from long-term subdermal levonorgestrel users and during the normal menstrual cycle. *Hum. Reprod.* 8:1632-1639.
60. WONODIREKSO S, AU CL, HADISAPUTRA W, AFFANDI B, ROGERS PAW (1993) Cytokeratins 8, 18 and 19 in endometrial epithelial cells during the normal menstrual cycle and in women receiving Norplant. *Contraception* 48:481-493.
61. MCCLURE N, MACPHERSON AM, ABBERTON K, HEALY DL, ROGERS PAW (1993) Human follicular fluid maturity and endothelial cell mitogenesis. *Hum. Reprod.* 10:1564-1569.

62. WOOD C, ROGERS PAW. (1993) Pregnancy after planned partial endometrial resection. *Aust. N.Z. J. Obstet. Gynaecol.* 33:316-318.
63. GOODGER (MACPHERSON) AM, ROGERS PAW (1993) Uterine endothelial cell proliferation before and after embryo implantation in rats. *J. Reprod. Fertil.* 99:451-457.
64. GOODGER (MACPHERSON) AM, ROGERS PAW (1994) Endometrial endothelial cell proliferation during the menstrual cycle. *Hum. Reprod.* 9:399-405
65. CRITCHLEY HOD, ABBERTON KM, TAYLOR N, HEALY, DL, ROGERS PAW (1994) Endometrial sex steroid receptor expression in women with menorrhagia. *Brit. J. Obstet. Gynaecol.* 101:428-434.
66. MCCLURE N, HEALY DL, ROGERS PAW, SULLIVAN J, BEATON L, HANING RV, CONNOLLY DT, ROBERTSON DM (1994) Vascular endothelial growth factor as capillary permeability agent in ovarian hyperstimulation syndrome. *Lancet* 344:235-236.
67. LEETON J, ROGERS P. (1994) Preparation of the endometrium for egg donation. *J. Assist. Reprod. Genetics* 10:459-461
68. MCCLURE N, MACPHERSON AM, HEALY DL, WREFORD N, ROGERS PAW (1994) An immunohistochemical study of the vascularization of the human Graafian follicle. *Hum. Reprod.* 9:1401-1405.
69. GOODGER (MACPHERSON) AM, ROGERS PAW, AFFANDI B (1994) Endometrial endothelial cell proliferation in longterm users of subdermal levonorgestrel. *Human Reproduction* 9: 1647-1651.
70. MCCLURE N, MACPHERSON AM, ABBERTON K, HEALY DL, WREFORD N, ROGERS PAW (1994) Human follicular fluid maturity and endothelial cell chemotaxis. *Human Reproduction* 9:1226-1230.
71. AU CL, AFFANDI B, ROGERS PAW (1994) Immunohistochemical staining of von Willebrand factor in endometrium of women during the first year of Norplant implants use. *Contraception* 50:477-489.
72. ABBERTON KM, ROGERS PAW (1995) Production of an endothelial cell migratory signal in rat endometrium during early pregnancy. *Cell Tiss. Res.* 279:215-220.
73. CRITCHLEY HOD, SUSIL B, KOORY J, MAMERS P, HEALY DL, ROGERS PAW, (1995) Endometrial histology and vascular appearance following endometrial ablation. *Gynaecological Endoscopy* 4:27-33.
74. AFFANDI B, HADISAPUTRA W, ROGERS PAW (1995) Exploring the aetiology of increased endometrial bleeding in Norplant Users: the role of local factors? *Med. J Indonesia* 4:274-279.

75. KELLY FD, TAWIA SA, ROGERS PAW. (1995) Immunohistochemical characterisation of human endometrial microvascular basement membrane components during the normal menstrual cycle. *Hum. Reprod.* 10:268-276.
76. THOMAS T, MACPHERSON AM, ROGERS PAW (1995) Ceruloplasmin gene expression in the rat uterus. *Biochimica et Biophysica Acta.* 1261:77-82.
77. WINGFIELD M, MACPHERSON A, HEALY DL, ROGERS PAW (1995) Cell proliferation is increased in the endometrium of women with endometriosis. *Fertility and Sterility* 64:340-346.
78. GOODGER (MACPHERSON) AM, ROGERS PAW (1995) Blood vessel growth in the endometrium. *Microcirculation* 2:329-343.
79. MARSH MM, BUTT AR, RILEY SC, ROGERS PAW, SUSIL B, AFFANDI B, FINDLAY JK, SALAMONSEN LA (1995) Immunolocalization of endothelin and neutral endopeptidase in the endometrium of users of subdermally implanted levonorgestrel (Norplant). *Hum. Reprod.* 10:2584-2589.
80. GOODGER (MACPHERSON) AM, ROGERS, PAW. (1995) Blood vessel growth and endothelial cell density in rat endometrium. *J. Reprod. Fert.* 105:259-261.
81. ROGERS PAW (1995) Current studies on human implantation: a brief overview. *Reprod. Fertil. Dev.* 7:1395-1399.
82. ROGERS PAW, HOSIE MJ, ORTIS A, SUSIL B, LEETON J, MURPHY CR (1996) Uterine glandular area during the menstrual cycle and the effects of different in-vitro fertilization related hormonal treatments. *Hum. Reprod.* 11:376-379.
83. ABBERTON KM, TAYLOR NH, HEALY DL, ROGERS PAW (1996) Vascular smooth muscle alpha actin distribution around endometrial arterioles during the menstrual cycle: increased expression during the perimenopause and lack of correlation with menorrhagia. *Hum. Reprod.* 11: 204-211.
84. LAU TM, AFFANDI B, ROGERS PAW (1996) Immunohistochemical detection of cathepsin D in endometrium from long-term subdermal levonorgestrel users and during the normal menstrual cycle. *Mol. Hum. Reprod.* 2:233-237.
85. KOOY J, TAYLOR NH, HEALY DL, ROGERS PAW. (1996) Endothelial cell proliferation in the endometrium of women with menorrhagia and in women following endometrial ablation. *Hum. Reprod.* 11:1067-1072.
86. ROGERS, PAW. (1996) Structure and function of endometrial blood vessels. *Hum. Reprod. Update* 2:57-62.

87. CLARK DA, WANG S, ROGERS PAW, VINCE G, AFFANDI B. (1996) Endometrial lymphomyeloid cells in abnormal uterine bleeding due to levonorgestrel (Norplant). *Hum. Reprod.* 11:1438-1444.
88. HICKEY M, LAU TM, RUSSELL P, FRASER I, ROGERS PAW (1996) Microvascular density in conditions of endometrial atrophy. *Hum. Reprod.* 11: 2009-2103.
89. PALMER JA, LAU TM, HICKEY M, ROGERS PAW. (1996) Immunohistochemical study of endometrial microvascular basement membrane components in women using Norplant. *Hum. Reprod.* 11:2142-2150.
90. ROGERS PAW, LEDERMAN F, KOOY J, TAYLOR NH, HEALY DL (1996) Endometrial vascular smooth muscle oestrogen and progesterone receptor distribution in women with and without menorrhagia. *Hum. Reprod.* 11:2003:2008.
91. WONODIREKSO S, HADISAPUTRA W, AFFANDI B, SIREGAR B, ROGERS PAW. (1996) Cytokeratin 8, 18 and 19 in endometrial epithelium of Norplant and norethisterone enanthate (NET-EN) injectable progestogen contraceptive users. *Hum. Reprod.* 11:144-149.
92. ROGERS PAW. (1996) Endometrial vasculature in Norplant® users. *Hum. Reprod.* 11:45-50.
93. WITJAKSONO J, LAU TM, AFFANDI B, ROGERS PAW. (1996) Estrogen treatment for increased bleeding in Norplant users. Preliminary results. *Hum. Reprod.* 11:109-114.
94. LAU TM, WITJAKSONO J, ROGERS PAW. (1996) Progesterone receptor in normal and Norplant endometrium. *Hum. Reprod.* 11:90-94.
95. HADISAPUTRA W, AFFANDI B, WITJAKSONO J, ROGERS PAW. (1996) Endometrial biopsy collection from women receiving Norplant®. *Hum. Reprod.* 11:31-33.
96. LAU TM, WITJAKSONO J, AFFANDI B, ROGERS PAW. (1996) Expression of progesterone receptor mRNA in the endometrium during the normal menstrual cycle and in Norplant users. *Hum. Reprod.* 11:2629-2634.
97. ORRE M, ROGERS PAW (1998) Reduced vascular basement membrane immunostaining in mucinous tumours of the ovary. *Int J Cancer* 79:139-143.
98. ROGERS PAW. (1998) To what extent does endometrial receptivity influence the outcome of assisted reproductive technology? *J. Ass. Reprod. & Gen.* 15:177-179.
99. WONODIREKSO S, HADISAPUTRA W, AFFANDI B, SIREGAR B, ROGERS PAW. (1998) Cytokeratin 8, 18 and 19 expressions, epithelial shedding, and stromal extravasation in endometrium of norethisterone enanthate (NET-EN) progestogen contraceptive users. *Medical Journal of Indonesia.* 7:16-24.

100. HII L, ROGERS PAW (1998) Endometrial vascular and glandular expression of integrin $\alpha v \beta 3$ in women with and without endometriosis. *Hum. Reprod.* 13:1030-1035.
101. ORRE M, LOFTI-MIRI M, MAMERS P, ROGERS PAW (1998) Increased microvessel density in mucinous compared with malignant serous and benign tumours of the ovary. *Brit. J. Cancer* 77: 2204-2209.
102. HEALY DL, ROGERS PAW, HII L, WINGFIELD M (1998) Angiogenesis: a new theory for endometriosis. *Hum Reprod Update* 4:736-740.
103. LAU TM, AFFANDI B, ROGERS PAW (1998) The effects levonorgestrel implants on vascular endothelial growth factor expression in the endometrium. *Mol Hum Reprod* 5:57-63.
104. ROGERS PAW, LEDERMAN F, TAYLOR N (1998) Endometrial microvascular growth in normal and dysfunctional states. *Hum Reprod Update* 4:503-508.
105. ORRE M, ROGERS PAW (1999) VEGF, VEGFR-1 and VEGFR-2, microvessel density and endothelial cell proliferation in tumours of the ovary. *Int J Cancer* 84:101-108.
106. VINCENT AL, MALAKOOTI N, ROGERS PAW, AFFANDI B, SALAMONSEN LA. (1999) Endometrial breakdown in women using Norplant is associated with migratory cell expression of matrix metalloproteinase-9 (gelatinase B). *Hum Reprod* 14:807-815.
107. ORRE M, ROGERS PAW (1999) Macrophages and microvessel density in tumours of the ovary. *Gyn Oncol* 73:47-50.
108. ABBERTON KM, TAYLOR NH, HEALY DL, ROGERS PAW. (1999) Vascular smooth muscle cell proliferation in arterioles of the human endometrium. *Hum Reprod* 14:1072-1079.
109. ROSAMILIA A, CANN L, DWYER P, SCURRY J, ROGERS PAW (1999) Bladder microvasculature in women with interstitial cystitis. *J Urology* 161:1865-1870.
110. GARGETT CE, LEDERMAN F, LAU TM, TAYLOR N, ROGERS PAW (1999) Lack of correlation between VEGF production and angiogenesis in the human endometrium. *Hum Reprod* 14:2080-2088.
111. ROGERS PAW, GARGETT CE (1999) Endometrial Angiogenesis. *Angiogenesis* 2:287-294.
112. ABBERTON KM, HEALY DL, ROGERS PAW (1999) Smooth muscle alpha actin and myosin heavy chain expression in the vascular smooth muscle cells surrounding endometrial arterioles. *Hum Reprod* 12:3095-3100.

113. ORRE M, SUSIL B, ROGERS PAW (1999) Microvessel density and vascular basement membrane immunostaining in tumours of the breast. *Angiogenesis* (3:175-180)
114. GARGETT CE, BUCAK K, ROGERS PAW. (2000) Isolation, characterisation and long-term culture of human myometrial microvascular endothelial cells. *Hum Reprod* 15:293-301.
115. VINCENT AJ, ZHANG J, OSTOR A, ROGERS PAW, AFFANDI B, KOVACS G, SALAMONSEN LA (2000) Matrix metalloproteinases-1 and -3 and mast cells are present in the endometrium of women using progestin-only contraceptives? *Hum Reprod.* 15:123-130.
116. CASEY R, ROGERS PAW, VOLLENHOVEN BJ. (2000) An immunohistochemical analysis of fibroid vasculature. *Hum Reprod* 15:1469-1475.
117. ROGERS PAW, PLUNKETT D, AFFANDI B. (2000) Perivascular smooth muscle α -actin is reduced in the endometrium of women with progestin-only contraceptive breakthrough bleeding. *Hum Reprod* 15: (in press)
118. ROGERS PAW, LEDERMAN F, PLUNKETT D, AFFANDI B. (2000) Bcl-2, Fas and Caspase 3 expression in endometrium from Norplant® users with and without breakthrough bleeding. *Hum Reprod* (in press)
119. WONODIREKSO S, AFFANDI B, SIREGAR B, BARASILA AC, DAMAYANTI L, ROGERS PAW. (2000) Endometrial epithelial integrity and subepithelial reticular fibre expression in progestin contraceptive acceptors. *Hum Reprod* (in press)
120. ACHEN MG, WILLIAMS RA, MINEKUS M, STENVERS K, ROGERS PAW, LEDERMAN F, ROUFAIL S, STACKER SA. (2000) Localization of vascular endothelial growth factor-D in malignant melanoma indicates a role in tumor angiogenesis. *J Pathol* (in press)
121. WINGFIELD M, MACPHERSON AM, HEALY DL, ROGERS PAW. (2000) Endothelial cell chemotaxis in response to endometrium-conditioned medium from women with and without endometriosis. *Angiogenesis* (Submitted)
122. LEETON J, PLATTEAU P, ROGERS PAW. (2000) The prognostic factors for pregnancy in a donor egg program. Are proluton injections necessary? *Hum Reprod* (submitted)
123. GARGETT CE, LEDERMAN F, HERYANTO B, ROGERS PAW (2000) Focal vascular endothelial growth factor correlates with angiogenesis in human endometrium. *Hum Reprod* (submitted)
124. HAMPTON AL, ROGERS PAW, AFFANDI B, SALAMONSEN LA. (2000) Expression of the chemokines, monocyte chemotactic protein (MCP)-1 and MCP-2 in endometrium of normal women and Norplant® users does not support a central role in macrophage

infiltration into endometrium. J Rep Immunol (submitted)

125. GARGETT CE, ROGERS PAW. (2000) Endometrial angiogenesis. Reviews Reprod. (in press)
126. JONES RJ, SALAMONSEN L, CRITCHLEY HOD, ROGERS PAW, AFFANDI B, FINDLAY J. (2000) Inhibin activin subunits are differentially expressed in endometrial cells and leukocytes during the menstrual cycle in early pregnancy in women using progestin-only contraceptives. Mol Hum Reprod (submitted)

NON-REFEREED CHAPTERS, REVIEWS AND ARTICLES

127. WELLS RT, HORTON DR, ROGERS P (1982). Thylacoleo carnifex Owen (Thylacoleonidae) : marsupial carnivore? In: Carniverous Marsupials. Ed. Archer M, A.N.U. Press, pp. 573-586.
128. GANNON BJ, BROWNING J, ROGERS PAW, HARPER B (1983) Microvascular organization in the intestine. In: Microcirculation of the Alimentary Tract. Eds. Koo A, Lam SK, Smaje LH. World Scientific, Singapore, pp. 39-55.
129. ROGERS PAW, GANNON BJ (1984). Uterine microvascular events prior to and during implantation in the rat. Prog Microcirc Res II pp. 48-53.
130. TROUNSON A, HOPPEN H-O, LUTJEN PJ, MOHR LR, ROGERS PAW, SATHANANTHAN AH (1985). In vitro fertilization: the state of the art. In: Gamete Quality and Fertility Regulation. Eds. Rolland R, Heineman MJ, Hillier SG, Vemer H. Excerpta Medica, Amsterdam pp. 325-343.
131. ROGERS PAW, TROUNSON AO (1986). IVF the future. In: In Vitro Fertilization : Past, Present and Future. Eds. Fishel S, Symonds D. IRL Press, Oxford, pp. 229-245.
132. HEALY DL, OKAMOTO S, MORROW L, THOMAS A, JONES M, McLACHLAN V, BESANKO M, MARTINEZ F and ROGERS P (1987). Contributions of in vitro fertilization to knowledge of the reproductive endocrinology of the menstrual cycle. In: Baillière's Clinical Endocrinology and metabolism. Ed. Burger HG, Vol 1, No1, pp. 133-152.
133. ROGERS P, LEETON J, CAMERON I, MURPHY C, HEALY D, LUTJEN P (1988). Oocyte donation. In: Clinical In Vitro Fertilization. Eds. Wood C, Trounson A. 2nd Edition, Springer-Verlag, London. pp. 143-154.
134. JONES HW, ROGERS PAW (1988). Results from in vitro fertilization. In: Clinical In Vitro Fertilization. Eds. Wood C, Trounson A. 2nd Edition, Springer-Verlag, London. pp. 51-62.

135. TROUNSON AO, ROGERS PAW, KOLA I, SATHANANTHAN H (1989). Fertilization, development and implantation. In: Textbook of Obstetrics. Eds. Turnbull A, Chamberlain G. Churchill Livingstone, Edinburgh, pp.49-66.
136. ROGERS PAW, MURPHY CR. (1989). Uterine receptivity for implantation: Human studies. In Blastocyst Implantation. Ed. Yoshinaga K., Serono Symposia, Adams Publishing Group, Boston. pp. 231-238.
137. ROGERS PAW (1989). Infertility and IVF techniques. In: Disease and Society. A Resource Book. Compiled by Ruth Dirks. Australian Academy of Science. pp. 5.19-5.20.
138. JAMES JM, ROGERS P, SPATE AP. (1989) Genesis of the caves of the Nullabor plain, Australia. Proc. International Union of Speleological Congresses, Budapest, August 1989.
139. ROGERS PAW, AU CL, AFFANDI B (1992) Effects of Norplant on the endometrial vasculature. In: Steroid Hormones and Uterine Bleeding. Eds Alexander NJ, d'Arcangues C. AAAS Press, Washington. pp 59-66.
140. ROGERS PAW. (1993) Uterine receptivity. In: Handbook of In Vitro Fertilization. Gardner D, Trounson AO, Eds, CRC Press, Boca Raton, Florida. pp. 263-285.
141. ROGERS PAW (1995) Current basic scientific studies on the mechanisms of progestogen induced endometrial bleeding. In: Advances in Human Reproduction. Eds. FA Moeloek, B Affandi and AO Trounson. Parthenon Publishing, UK. Section 5, pp217-224.
142. TROUNSON AO, ROGERS PAW, KOLA I, SATHANANTHAN H (1995). Fertilization, early development and implantation. In: Turnbull's Obstetrics. Second Edition. Eds. Chamberlain G. Churchill Livingstone. Edinburgh. Section 1:3, pp25-43.
143. ROGERS PAW (1995) Maternal age effects on the endometrium. 2nd Joint Symposium. Review of the major success factors in IVF and the treatment of endometriosis. Monash IVF & Cha General Hospital. Seoul, Korea. April 29-30th. pp 177-179.
144. ROGERS PAW, LEDERMAN F, KOORY J, TAYLOR NH, HEALY DL (1996) Vascular smooth muscle oestrogen and progesterone receptor distribution in the endometrium of women with and without menorrhagia. In: 6th World Congress for Microcirculation. Eds. K. Messmer, WM Kübler. Monduzzi Editore. pp 803-807.
145. ABBERTON KM, HEALY DL, ROGERS PAW (1996) Vascular smooth muscle cell proliferation in the human endometrium. In: 6th World Congress for Microcirculation. Eds. K. Messmer, WM Kübler. Monduzzi Editore. pp 791-795.
146. ORRE M, HEALY DL, MC CLURE N, ROBERTSON D, ROGERS PAW (1997) Vascular endothelial growth factor is an intraovarian regulator of angiogenesis and corpus luteum formation. In: FSH Action and Intraovarian Regulation Fauser B.C.J.M. Ed. The Parthenon Publishing Group. New York. pp167-175.

147. ROGERS PAW (1998) Menstruation. In: Estrogens and progestogens in clinical practice. Eds. I. Fraser, R. Jansen, R. Lobo and M. Whitehead. Churchill Livingstone, Edinburgh. U.K. pp 163-172.
148. ROGERS PAW (1998) The endometrial vascular bed. In: Clinical disorders of the endometrium and menstrual cycle. Eds. I.T. Cameron, I.S. Fraser and S.K. Smith. Oxford University Press, New York, USA. pp 31-45.
149. TSALTAS J, ROGERS PAW, GARGETT C, HEALY DL (1998) Excessive angiogenesis: A new theory for endometriosis. *Curr Obs & Gyn* 8:4;186-190.
150. ROGERS PAW, HUI L (1998) Endometrial immunostaining for $\alpha_v \beta_3$ integrin. Letter to Editor. *Hum Reprod* 13:3579-3580.
151. GARGETT C, TSALTAS J, ROGERS PAW, TAYLOR N, LAWRENCE M, HEALY DL. (1999) Excessive angiogenesis: a new theory for endometriosis. In: *Understanding Endometriosis. Proceedings of the VI World Congress on Endometriosis*. Edited by A. Lemay and R. Maheux. pp
152. ROGERS PAW (1999) Mechanisms of progestin-induced endometrial bleeding. *Gyn Forum* 4:17-21.
153. ROGERS PAW, LEETON J (1999) Uterine receptivity and embryo transfer. In: *Handbook of In Vitro Fertilization 2nd edition*. Gardner D, Trounson AO, Eds. 21:499-528.
154. ROGERS PAW (2000) Endometriosis: why and how? Harwood Academic Publishers gmbh. In: *Hormones and Women's Health: The Reproductive Years*. 14:127-132.
155. DOCKERY P, PERRET S, ROGERS PAW, BULUT EH, REA B, WARREN MA, LI TC, HARVEY BJ, JENKINS D, COOKE ID. (2000) Endometrial morphology and the endometrial vascular bed. 39th RCOG Study Group on Dysfunctional Uterine Bleeding. 27-29 March.
156. WESTON GC, ROGERS PAW. (2000) Angiogenesis and the endometrium. *Bailliere's Clinical Obstetrics and Gynaecology*. 14: (in press) 18 pages

ABSTRACTS

1. GANNON BJ, ROGERS PAW (1978). Gill microanatomy and microcirculation in the southern bluefin tuna. Aust Soc Fish Biol 5th Annual Conference.
2. GANNON BJ, ROGERS PAW, O'BRIEN PE (1980). Two capillary plexuses in human intestinal villi. Micron 11, Suppl 1:25.
3. GANNON BJ, GORE RW, ROGERS PAW (1980). Dual blood supplies to intestinal villi of rabbit and rat. Microvasc Res 19:247.
4. ROGERS PAW (1980). Vascular and microvascular anatomy of the crayfish gill (*Jasus novaehollandiae*). Aust Soc Fish Biol 7th Annual Conference.
5. GANNON BJ, ROGERS PAW, GORE RW (1981). Is there an anatomical basis for a vascular counter current mechanism in rabbit and human intestinal villi? Proc Anat Soc Aust NZ J Anat 132:315.
6. ROGERS PAW, MURPHY CR, GANNON BJ (1981). Microvasculature of the rat uterus during early pregnancy. Proc 13th Aust Conf Exp Path.
7. ROGERS PAW, MURPHY CR, GANNON BJ (1982). Absence of capillaries in the endometrium surrounding the implanting rat blastocyst. Proc 7th Aust Conf Electron Microscopy p. 75.
8. ROGERS PAW, MURPHY CR, GANNON BJ (1982). Changes in the microvasculature of the rat uterus during implantation. Proc 7th Aust Conf Electron Microscopy p. 39.
9. ROGERS PAW, MURPHY CR, SQUIRES KR, MacLENNAN AH (1982). The effects of relaxin on the antimesometrial positioning of the rat blastocyst for implantation. Proc 1st Ann Conf Fert Soc Aust 1:60.
10. ROGERS PAW, MURPHY CR, GANNON BJ (1983). Effects of an IUD on the spatial organisation of the uterine vasculature in pregnant rats. Proc Anat Soc Aust NZ, J Anat 136:646-647.
11. MacLENNAN AH, ROGERS PAW, KIERIN JFP (1983). The role of relaxin in implantation. Aust Perinatal Soc Inaugural Meeting.
12. ROGERS PAW, GANNON BJ (1983). Uterine microvascular events prior to and during implantation in the rat. Second Aust NZ Symp Microcirc Abstracts Vol II:11.
13. ROGERS PAW, MURPHY CR, GANNON BJ (1983). Effects of an IUCD on endometrial morphology around the time of implantation in the rat. Aust Soc Rep Biol Proc 15th Ann Conf, pp. 63.

14. ROGERS PAW, MILNE BJ, TROUNSON AO (1984). Embryo viability and uterine receptivity in human IVF. Aust Soc Rep Biol Proc 16th Ann Conf, pp. 39.
15. KOVACS GT, ROGERS PAW (1984). IVF - a practical option when AID fails. Proc 3rd Ann Conf Fert Soc Aust. pp. 2.
16. ROGERS PAW, MILNE BJ, TROUNSON AO (1984). The effect of stimulation to produce multiple follicular development on embryo viability and uterine receptivity in human IVF. Proc 3rd Ann Conf Fert Soc Aust, pp. 32.
17. LUTJEN J, CARO CM, JESSUP D, ROGERS P, TROUNSON A (1984). Some factors affecting success rates of IVF. Proc 3rd Ann Conf Fert Soc Aust (Poster F).
18. ROGERS PAW (1985). Culture media : quality control. Aust Soc for Reprod Biol. Embryo Transfer Satellite Symposium, 25th August 1985. Invited Lecture.
19. ROGERS PAW (1985). Embryo viability and uterine receptivity. 4th World Conference on IVF, Melbourne, pp 133. Plenary Lecture.
20. ROGERS PAW, HARMAN J, McDONALD J, FIELD P, CROFT M, BARLOW A (1985). The use of previous menstrual cycle length history to individualize ovulation induction for IVF. 4th World Conference on IVF, Melbourne, pp 164.
21. HOWLETT D, ROGERS PAW (1985). The use of hyaluronidase to assess oocyte maturity in an in vitro fertilization programme. 4th World Conference on IVF, Melbourne, pp. 47.
22. MARTINEZ F, ROGERS PAW, TROUNSON AO (1985). An analysis of ectopic pregnancies in the Monash IVF programme. 4th World Conference on IVF, Melbourne, Poster 13.
23. KOVACS GT, ROGERS PAW (1985). The assessment of in vitro fertilization success rates by life table analysis. 4th World Conference on IVF, Melbourne, pp. 18.
24. ROGERS PAW, MACPHERSON A, BEATON L (1986). Embryo implantation in the anterior chamber of the rat eye following transplantation of uterine tissue. Gordon Conference on Mammalian Genital Tract, Plymouth, New Hampshire, July 7-11, 1986.
25. ROGERS PAW, MACPHERSON A, BEATON L (1986). Embryo-uterine interaction using the anterior eye chamber in the rat. Aust Soc Reprod Biol, Proc 18th Annual Conference, pp. 97.
26. CHIAPPAZZO L, ROGERS P, KIRBY C, TROUNSON A (1986). The use of human amniotic fluid as an embryo culture medium for human IVF. Aust Soc Reprod Biol, Proc 18th Annual Conference, pp. 35.

27. HEALY DL, BESANKO M, McLAUGHLIN V, MORROW L, OKAMOTO S, ROGERS P, THOMAS T (1986). Buserelin in management of unsatisfactory superovulation response in an IVF programme. Endocrine Soc Aust, September 1986.
28. ROGERS PAW, MACPHERSON A, BEATON L (1986). In vivo study of uterine response to embryo implantation using the anterior chamber of the eye in the rat. Fertility Society of Australia, Adelaide, December 3-6, Clin. Reprod. Fertil. 4:449-450.
29. MURPHY CR, ROGERS PAW, LEETON J, HOSIE M, BEATON L, MACPHERSON A (1986). Endometrial surface ultrastructure in patients with premature ovarian failure following steroid hormone replacement therapy. Fertility Society of Australia, Adelaide, December 3-6, Clin. Reprod. Fertil. 4:449-450.
30. OKAMOTO SH, HEALY DL, HOWLETT DT, ROGERS PAW, TROUNSON AO, WOOD EC (1986). An analysis of plasma estradiol concentrations during clomiphene citrate-human menopausal gonadotrophin stimulation in an in vitro fertilization-embryo transfer programme. Fertility Society of Australia, Adelaide, December 3-6, pp.B1.
31. ROGERS PAW, MACPHERSON A, BEATON L (1987). Microvascular events during implantation. 4th Aust. NZ Symp. Microcirculation, Sydney, pp. 29.
32. ROGERS PAW, MACPHERSON A, BEATON L (1987). Embryo implantation in the anterior chamber of the eye : effects on uterine allografts and the microvasculature. 5th World Conf. IVF, Norfolk, USA. Abstract OC-419.
33. ROGERS PAW, MURPHY CR, LEETON J, HOSIE M, BEATON L, MACPHERSON A (1987). Ultrastructure of human endometrial epithelium following steroid replacement for premature ovarian failure. 5th World Conf. IVF, Norfolk, USA. Abstract AP-615.
34. OKAMOTO SH, HEALY DL, MORROW LM, ROGERS PAW, TROUNSON AO, WOOD EC (1987). Predictive value of plasma human chorionic gonadotrophin β -subunit (β -HCG) in diagnosing ectopic pregnancy following in vitro fertilization and embryo transfer. 5th World Conf. IVF, Norfolk, USA. Abstract OC-434.
35. GIANAROLI L, TROUNSON A, SERACCHIALI R, ROGERS PAW, FERRARETTI AP, KIRBY C, CHIAPPAZZO L, FLAMIGNI C (1987). Fertilization and culture in physiological fluids : a major improvement in IVF success rates in a multicentre trial. 5th World Conf. IVF, Norfolk, USA. Abstract PP-101.
36. KOLA I, TROUNSON A, DAWSON G, ROGERS P (1987). Trippronuclear human oocytes : altered cleavage patterns and subsequent karyotypic analysis of embryos. Aust Soc Reprod Biol Proc 19th Ann Conf, pp.49.
37. ROGERS PAW, MACPHERSON A, BEATON L (1987). Ultrastructural response of endothelial cells to embryo implantation in a non-uterine site. Fertility Society of Australia, November 11-14, pp. 048.

38. CAMERON IT, ROGERS PAW, BESANKO M, MACLACHLAN VB, O'SHEA FC, HEALY DL, LEETON J (1987). Artificial menstrual cycles in agonadal women : an assessment of steroid replacement therapy. Fertility Society of Australia, November 11-14, pp. 050.
39. MURPHY CM, ROGERS PAW, LEETON J, CAMERON I, HOSIE M, BEATON L, MACPHERSON A (1987). Scanning electron microscopy of human uterine epithelium after varying hormonal replacement regimes. Fertility Society of Australia, November 11-14, pp P17.
40. ROGERS PAW, MACPHERSON A and BEATON L (1988). Vascular response following the interspecies transfer of embryos to a non-uterine site. Gordon Research conference on Reproductive Tract Biology. Wolfboro, New Hampshire. July 3-8.
41. ROGERS PAW, MACPHERSON A and BEATON L (1988). Interspecies transfer of preimplantation embryos to a non-uterine site. Fertility Society of Australia, August 28-Sept. 1.
42. CAMERON IT, ROGERS PAW, HEALY DL and LEETON J (1988). The development of a flexible steroid replacement schedule for agonadal women undergoing in-vitro fertilization using donated oocytes. Fertility Society of Australia, August 28-Sept. 1.
43. MURPHY CR, ROGERS PAW, KOVACS GT, HAILES J, HOSIE M, BEATON L and MACPHERSON A (1988). Evaluation of exogenous hormonal therapy on postmenopausal patients by scanning electron microscopy. Fertility Society of Australia, August 28 Sept. 1.
44. HOSIE M, MURPHY CR, ROGERS PAW, LEETON J and HEALY D (1988). A morphometric scoring system for scanning electron microscopic data of the human endometrium. Fertility Society of Australia, August 28-Sept. 1, Poster 13.
45. OKAMOTO S, HEALY DL, MORROW LM, ROGERS PAW, TROUNSON AO (1988). Human chorionic gonadotrophin β -subunit (β -hCG) concentrations predict pregnancy outcome following IVF-ET. 8th International Congress of Endocrinology, Kyoto, Japan
46. ROGERS PAW, MACPHERSON AM and BEATON LA (1989). The response of iridial microvessels to allogeneic and xenogeneic implantation stage embryos. Progress in Microcirculation Research. Proceedings of the Fifth Australian and New Zealand Microcirculation Symposium. Canberra. pp 1-2
47. ROGERS PAW (1989). Endometrial microcirculation. Progress in Microcirculation Research. Proceedings of the Fifth Australian and New Zealand Microcirculation Symposium. Canberra. pp 83-84.
48. CAMERON IT, ROGERS PAW, CARO C, LEETON JF (1989). Oocyte donation and in vitro fertilisation for agonadal women. British Congress of Obstetrics and Gynaecology. July.

49. ROGERS PAW. (1989) Vascular density of the rat endometrial subepithelial capillary plexus during the oestrus cycle and following ovariectomy. Australian Society Reproductive Biology, 21st Annual Conference. Melbourne, September 27 - 29 pp19.
50. HOSIE MJ, MURPHY CR, ROGERS PAW, LEETON J, BEATON L. (1989) A freeze fracture study of the tight junctions of the uterine luminal epithelium from patients on hormone replacement therapy on an IVF programme. Fertility Society of Australia, 8th Annual Conference, Canberra. November 30 - December 2. pp 72.
51. HOSIE MJ, MURPHY CR, ROGERS PAW, HEALY DL, LEETON J, BEATON L. (1989) A morphometric analysis of glandular epithelium from patients in hormone replacement therapy in an IVF programme. Fertility Society of Australia, 8th Annual Conference, Canberra. November 30 - December 2. pp 71.
52. ROGERS PAW, POLSON D, LEONI M, SUSIL B. (1989) Correlation of endometrial histology with ultrasound appearance following different stimulation protocols for IVF. Fertility Society of Australia, 8th Annual Conference, Canberra. November 30 - December 2. pp 35.
53. KRAPEZ JA, POLSON DW, ROGERS PAW. (1989) A randomised controlled trial of luteal support with vaginal progesterone pessaries in an IVF/GIFT programme. Fertility Society of Australia, 8th Annual Conference, Canberra. November 30 - December 2. pp 36.
54. KING CM, ROGERS PAW, LEETON JF, POLSON DW, HEALY DL. (1989) A comparison of pregnancy rates for donor egg patients receiving two types of steroid replacement schedules. Fertility Society of Australia, 8th Annual Conference, Canberra. November 30 - December 2. pp 15.
55. POLSON DW, KING CM, ROGERS PAW, HEALY DL, RENOU P, LEETON JF. (1989) The Monash IVF donor oocyte programme - Obstetric and neonatal outcome. Fertility Society of Australia, 8th Annual Conference, Canberra. November 30 - December 2. pp 18.
56. ROGERS PAW (1989) Uterine receptivity for implantation. Proc. Embryology Symp., Fert. Soc. Aust., Canberra, 28 November, pp.27-29.
57. ROGERS PAW, MACPHERSON AM, BEATON L. (1990) Loss of neutrophils from rat endometrium during implantation. Proc 29th Nat Sci Conf Aust Soc Med Res, Lorne, 9-12 Dec. pp70.
58. ABBERTON KM, ROGERS PAW. (1990) A signal for vascular endothelial cell migration in rat endometrium. Proc 29th Nat Sci Conf Aust Soc Med Res, Lorne, 9-12 Dec, pp69.
59. ROGERS PAW, MACPHERSON AM. (1991) In vivo microscopy of rat endometrial microcirculation during the oestrous cycle, following ovariectomy, and at embryo implantation. Prog. Microcirc. Res., Proc. 6th Aust. NZ Symposium, 3-6 Feb, pp51-53.

60. ABBERTON KM, ROGERS PAW. (1991) A migratory signal for vascular endothelial cells in the endometrium of the rat. *Prog. Microcirc. Res.*, Proc. 6th Aust. NZ Symposium, 3-6 Feb, pp55-57.
61. MACPHERSON AM, ROGERS PAW. (1991) Permeability of the rat endometrial subepithelial capillary plexus to different molecular weight fluorescent-labeled dextrans after a single dose of oestradiol. *Prog. Microcirc. Res.*, Proc. 6th Aust. NZ Symposium, 3-6 Feb, pp58-60.
62. ROGERS PAW, ABBERTON KM. (1991) Evidence for a novel, steroid regulated, angiogenic factor in human endometrium. 3rd Aust. Menopause Soc. Congress, Adelaide, April 21-24.
63. ROGERS PAW (1991) The early endometrial microvascular response during implantation in the rat. NSF-DITAC Cooperative Workshop on "Successful maternal recognition of pregnancy: Signaling between the conceptus and maternal system." University of Hawaii, Honolulu, July 1-3rd.
64. ROGERS PAW, MURPHY CR (1991) Morphometric and freeze fracture studies of human endometrium during the peri-implantation period. NSF-DITAC Cooperative Workshop on "Successful maternal recognition of pregnancy: Signaling between the conceptus and maternal system." University of Hawaii, Honolulu, July 1-3rd.
65. MCKAY SA, ROGERS PAW. (1991) In vivo microscopy of rat endometrial microcirculation at embryo implantation. 5th World Congress for Microcirculation, Louisville, Kentucky, USA, August 31st- September 5th, Abstract 510.
66. AU CL, ABBERTON KM, ROGERS PAW. (1991) Local regulation of angiogenesis and endothelial cell factor VIII levels in human endometrium. 5th World Congress for Microcirculation, Louisville, Kentucky, USA, August 31st- September 5th, Abstract 800.
67. MCKAY SA, ROGERS PAW. (1991) In vivo microscopy of the endometrial microcirculation at embryo implantation in the rat. Australian Society Reproductive Biology, Proceedings 23rd Annual Conference. Sydney, September 30 - October 2nd, pp1.
68. AU CL, ABBERTON KM, ROGERS PAW. (1991) Local regulation of angiogenesis and endothelial cell factor VIII levels in human endometrium. Australian Society Reproductive Biology, Proceedings 23rd Annual Conference. Sydney, September 30 - October 2nd, pp2.
69. ORTIS A, HOSIE M, MURPHY CR, ROGERS PAW. (1991) Turner's syndrome patients have underdeveloped uterine glands. Australian Society Reproductive Biology, Proceedings 23rd Annual Conference. Sydney, September 30 - October 2nd, pp13.
70. FINDLAY JK, BUTT AR, MACPHERSON AM, ROGERS PAW, SALAMONSEN LA. (1991) Immunolocalization of the vasoconstrictor, endothelin, in human endometrium throughout the menstrual cycle. Australian Society Reproductive Biology, Proceedings 23rd Annual Conference. Sydney, September 30 - October 2nd, pp15.

71. ROGERS PAW, BEATON LA, MCKAY TAWIA SA. (1991) Immunolocalization of cellular adhesion molecules in human endometrium during the menstrual cycle. Fertility Society of Australia, 10th Annual Conference, Lorne, Victoria. November 18-22nd. pp 7.
72. CALDERON I, LEONI M, KIOULAFAS A, BEATON L, SUSIL B, LEETON J, ROGERS P. (1991) Endometrial histology and ultrasound appearances at time of oocyte retrieval in superovulated patients. Fertility Society of Australia, 10th Annual Conference, Lorne, Victoria. November 18-22nd. pp 3.
73. SUBAKIR SB, ABBERTON KM, ROGERS PAW. (1991) Endometrial angiogenic response in patients with menorrhagia. Fertility Society of Australia, 10th Annual Conference, Lorne, Victoria. November 18-22nd. pp 60.
74. ROGERS PAW. (1991) Norplant and the endometrium. Fertility Society of Australia, 10th Annual Conference, Lorne, Victoria. November 18-22nd.
75. ROGERS PAW. (1991) Uterine receptivity. Sero Symposium on Oocyte Donation, Melbourne, 22-24th November.
76. ROGERS PAW. (1991) Local regulation of human endometrial microvascular function. Proceedings of the 30th National Scientific Conference, Australian Society for Medical Research, Canberra, 15-18th December, pp 67.
77. ROGERS PAW, AU CL, AFFANDI B (1992) Effects of Norplant on the endometrial vasculature. NIH meeting on "Exogenous hormones and dysfunctional uterine bleeding", Bethesda, USA, May 4-6th, 1992.
78. ROGERS PAW (1992) Basic mechanisms of endometrial bleeding. Australian Menopause Society, 3rd Congress, Melbourne, April 5-8th. pp 23.
79. ABBERTON KM, TAYLOR N, SUSIL B, ROGERS PAW (1992) A comparison of endometrial microvascular Factor VIII related antigen and collagen IV between women with and without perimenopausal bleeding. Australian Menopause Society, 3rd Congress, Melbourne, April 5-8th. pp 53.
80. MACPHERSON AM, ROGERS PAW (1992) Proliferating endothelial cells in the endometrium of early pregnant rats. 17th European Conference on Microcirculation, London, 5-10th July.
81. AU CL, AFFANDI B, ROGERS PAW (1992) Changes in blood vessel density and endothelial von Willebrand factor levels in the endometrium of women receiving subcutaneous levonorgestrel implants - Norplant. Australian Society for Reproductive Biology, Proceedings 24th Annual Conference. Adelaide, September 27-30th, p122.
82. TAWIA SA, BEATON LA, ROGERS PAW (1992) Expression of cellular adhesion molecules in human endometrium throughout the menstrual cycle. Australian Society for

Reproductive Biology, Proceedings 24th Annual Conference. Adelaide, September 27-30th, p123.

83. MACPHERSON AM, ROGERS PAW (1992) Proliferating endothelial cells in the endometrium of early pregnant rats. Australian Society for Reproductive Biology, Proceedings 24th Annual Conference. Adelaide, September 27-30th, p34.
84. CRITCHLEY HOD, AU CL, BAILEY DA, AFFANDI B, ROGERS PAW (1992) Progesterone and oestrogen receptor distribution in endometrium from "Norplant" users. Proc. Endocrine Soc. Aust., Adelaide, September 27-30th, p114.
85. LEETON J, CALDERON I, AZUMA K, KING C, BURDEN J, ROGERS P (1992) The main factor in infertility: Egg or endometrium? The American Fertility Society, 48th Annual Meeting, New Orleans, USA. 2-5th November, P-042.
86. LEETON J, CALDERON I, AZUMA K, BURDEN J, RENOU P, KING C, ROGERS P (1992) Pregnancy outcome of 50 women treated successfully on a donor oocyte program. The American Fertility Society, 48th Annual Meeting, New Orleans, USA. 2-5th November, P-146.
87. WONODIREKSO S, AU CL, ROGERS PAW (1992) Cytokeratin 8, 18 and 19 in endometrial epithelial cells during the normal menstrual cycle and in women receiving Norplant. Fertility Society of Australia, 11th Annual Conference, Adelaide, South Australia. December 2-5th.
88. ABBERTON KM, AU CL, TAYLOR N, SUSIL B, ROGERS PAW (1992) Endometrial microvascular Factor VIII related antigen in women with and without increased perimenopausal bleeding. Fertility Society of Australia, 11th Annual Conference, Adelaide, South Australia. December 2-5th.
89. MCCLURE N, ABBERTON K, HEALY DL, MACPHERSON A, ROGERS PAW (1992) Follicular fluid maturity and endothelial cell mitogenesis. Fertility Society of Australia, 11th Annual Conference, Adelaide, South Australia. December 2-5th.
90. CRITCHLEY HOD, BAILEY DA, HEALY DL, ROGERS PAW (1992) Sex steroid receptor distribution in endometrium from women with menorrhagia before and after endometrial ablation. Fertility Society of Australia, 11th Annual Conference, Adelaide, South Australia. December 2-5th.
91. MACPHERSON AM, ROGERS PAW (1992) Proliferating endothelial cells in the rat uterus prior to embryo implantation. 2nd Baker Institute Symposium, Melbourne, 11-13th December.
92. ROGERS PAW (1992) Endometrial angiogenesis. 2nd Baker Institute Symposium, Melbourne, 11-13th December.

93. ROGERS PAW, AU CL, AFFANDI B (1992) Endometrial microvascular density following exposure to long-term progestogen contraception. Proceedings of the 31st National Scientific Conference, Australian Society for Medical Research, Brisbane, 13-16th December.
94. CRITCHLEY HOD, AU CL, BAILEY DA, AFFANDI B, ROGERS PAW (1992) Progesterone and oestrogen receptor distribution in endometrium from "Norplant" users. Proceedings of the 31st National Scientific Conference, Australian Society for Medical Research, Brisbane. 13-16th December.
95. ARCHBOLD DC, ROGERS PAW (1992) Expression of LFA-1, MAC-1 and LCA in human endometrium throughout the normal menstrual cycle. Proceedings of the 31st National Scientific Conference, Australian Society for Medical Research, Brisbane, 13-16th December.
96. MARSH MM, BUTT AR, ROGERS PAW, SALAMONSEN LA, FINDLAY JK (1992) Immunolocalization of endothelin in the endometrium of Norplant users. Proceedings of the 31st National Scientific Conference, Australian Society for Medical Research, Brisbane, 13-16th December.
97. MACPHERSON AM, ROGERS PAW (1993) Proliferating endothelial cells in the human endometrium during the menstrual cycle. Prog. Microcirc. Res., Proc. 7th Aust. NZ Symposium, 7-9 Feb, pp24-26.
98. WINGFIELD M, MACPHERSON A, HEALY DL, ROGERS PAW (1993) Endothelial cell proliferation in endometriosis. Prog. Microcirc. Res., Proc. 7th Aust. NZ Symposium, 7-9 Feb, pp28-30.
99. ROGERS PAW, AU CL, CRITCHLEY HOD, AFFANDI B (1993) Basic studies on endometrial bleeding in norplant users. Proc. VIIIth World Congress on Human Reproduction, Bali, Indonesia. April 4-9th. pp97.
100. TAWIA SA, BEATON LA, ROGERS PAW (1993) Immunolocalization of cellular adhesion molecules in human endometrium throughout the menstrual cycle. Presented at: Genes and Development; A Scientific Meeting to Open the Monash University Institute of Reproduction and Development. Abstract No. 8.
101. MACPHERSON AM, ROGERS PAW (1993) Human endometrial endothelial cell proliferation during the menstrual cycle. Australian Society for Reproductive Biology, Proceedings 25th Annual Conference. Dunedin, NZ August 23-25th, pp 79.
102. ABBERTON KM, ROGERS PAW TAYLOR N, CRITCHLEY HOD (1993) Endometrial oestrogen and progesterone receptor expression in women with menorrhagia. Australian Society for Reproductive Biology, Proceedings 25th Annual Conference. Dunedin, NZ August 23-25th, pp 81.

103. ROGERS PAW, MACPHERSON AM, ABBERTON KM (1993) Endometrial angiogenesis during the menstrual cycle. Symposium on: "New cancer strategies: Angiogenesis and angiogenesis antagonists". Philadelphia, USA, October 18-19.
104. AU C.L, ROGERS PAW, AFFANDI B (1993) Endometrial vascular density and endothelial cell von Willebrand factor levels in Norplant users. Hong Kong Society for the Study of Endocrinology Metabolism & Reproduction 8th Annual Scientific Meeting. October 30th.
105. CRITCHLEY HOD, SUSIL B, KOOY J, HEALY DL, ROGERS PAW (1993) Endometrial morphology following endometrial ablation. The Fertility Society of Australia XII Annual Scientific Meeting in conjunction with the Australian Gynaecological Endoscopy Society III Annual Scientific Meeting. Sydney, November 2-6th. Abstract No. 06.
106. WINGFIELD M, MACPHERSON A, HEALY DL, ROGERS PAW. (1993) Endothelial cell proliferation in endometriosis. The Fertility Society of Australia XII Annual Scientific Meeting in conjunction with the Australian Gynaecological Endoscopy Society III Annual Scientific Meeting. Sydney, November 2-6th. Abstract No. 0109.
107. ROGERS PAW, AFFANDI B. (1993) Research on progestogen-induced vaginal bleeding: a collaboration between Indonesia and Australia. 14th Asian and Oceanic Congress of Obstetrics and Gynaecology, Manila, November 14-19th.
108. AREVALO J, HEALY D, CRITCHLEY H, ROGERS PAW. (1993) The role of macrophages in the endometrium. Thirty-Second National Scientific Conference. The Australian Society for Medical Research. Adelaide, November 28th-December 1st. Abstract No. 010.
109. LEDERMAN FL, ROGERS PAW. (1993) Endometrial Angiogenesis: Production of endothelial cell migratory factor. Thirty-Second National Scientific Conference. The Australian Society for Medical Research. Adelaide, November 28th-December 1st. Abstract No. 014.
110. KELLY FD, TAWIA SA, RICE GE, ROGERS PAW. (1993) Microvascular heterogeneity in human endometrium. Thirty-Second National Scientific Conference. The Australian Society for Medical Research. Adelaide, November 28th-December 1st. P-9.
111. KOOY J, CRITCHLEY HOD, HEALY DL, ROGERS PAW. (1993) Vascular growth in post-ablation human endometrium. Thirty-Second National Scientific Conference. The Australian Society for Medical Research. Adelaide, November 28th-December 1st. P-10.
112. JAMES JM, ROGERS PAW. (1994) The "mysterious" calcite precipitating organism of the Nullarbor caves, Australia. Breakthroughs in Karst Geomicrobiology and Redox Geochemistry. Colorado Springs, USA, February 16-19th.

113. WINGFIELD M, MACPHERSON A, HEALY DL, ROGERS PAW. (1994) Endothelial Cell Proliferation in Endometriosis. IVth World Congress on Endometriosis, Salvador, Bahia, Brazil. May 25-28th.
114. KOOY J, TAYLOR NH, HEALY DL, ROGERS PAW. (1994) Endothelial cell proliferation in the endometrium of menorrhagic and post-ablation subjects. Fertility Society of Australia, XIII Annual Scientific Meeting, Brisbane, October 3-7th.
115. ABBERTON KM, TAYLOR NH, ROGERS PAW. (1994) Differences in the endometrial microvasculature of women with or without perimenopausal menorrhagia. Fertility Society of Australia, XIII Annual Scientific Meeting, Brisbane, October 3-7th.
116. LAU TM, AFFANDI B, ROGERS PAW. (1994) Expression of cathepsin D in control and levonorgestral exposed human endometrium. Australian Society for Medical Research, Thirty-Third National Scientific Conference, Melbourne, November 27-30th.
117. LOTFI-MIRI M, ROGERS PAW, MAMERS P, SUSIL B, QUINN M. (1994) Endothelial cell proliferation in malignant and benign human ovarian tumours. Australian Society for Medical Research, Thirty-Third National Scientific Conference, Melbourne, November 27-30th.
118. PALMER JA, LAU T, ROGERS PAW. (1994) The basement membrane in the endometrial microvasculature of Norplant users. Australian Society for Medical Research, Thirty-Third National Scientific Conference, Melbourne, November 27-30th.
119. TAWIA SA, ROGERS PAW. (1994) Immunohistochemical localisation of vascular basement membrane components during rat embryo implantation. Australian Society for Medical Research, Thirty-Third National Scientific Conference, Melbourne, November 27-30th.
120. MARSH MM, BUTT AR, ROGERS PAW, FINDLAY JK, SALAMONSEN LA. (1994) Relationship between menstrual bleeding and endothelin immunolocalized in the endometrium of users of subdermally implanted levonorgestrel. Aust Soc Med Res, Thirty-Third National Scientific Conference, Melbourne, November 27-30th.
121. ROGERS PAW. (1995) Reproductive angiogenesis. Progress in Microcirculation Research. Proceedings of the Eighth Australian and New Zealand Symposium. February 2-4th.
122. HADISAPUTRA W, WITJAKSONO J, AFFANDI B, ROGERS PAW. (1995) Endometrial biopsy collection. WHO sponsored meeting on "Current Research on Progestin-only Contraceptives and Endometrial Bleeding". Bali, October 14-15th.
123. ROGERS PAW. (1995) The endometrial vasculature. WHO sponsored meeting on "Current Research on Progestin-only Contraceptives and Endometrial Bleeding". Bali, October 14-15th.

124. LAU TM, AFFANDI B, ROGERS PAW. (1995) In situ hybridisation studies on endometrial progesterone receptor in Norplant users and during the normal cycle. WHO sponsored meeting on "Current Research on Progestin-only Contraceptives and Endometrial Bleeding". Bali, October 14-15th.
125. WITJAKSONO J, LAU T, ROGERS PAW. (1995) Effects of estrogen treatment on the endometrium of Norplant users. WHO sponsored meeting on "Current Research on Progestin-only Contraceptives and Endometrial Bleeding". Bali, October 14-15th.
126. WONODIREKSO S, ROGERS PAW. (1995) Endometrial cytokeratins in users of Norplant and norethisterone enanthate (NET-EN). WHO sponsored meeting on "Current Research on Progestin-only Contraceptives and Endometrial Bleeding". Bali, October 14-15th.
127. PALMER JA, LAU TM, HICKEY M, ROGERS PAW. (1995) Immunohistochemical study of endometrial microvascular basement membrane components in women using Norplant. Fertility Society of Australia, Melbourne, November 19-25th. FSA 71.
128. ABBERTON KM, TAYLOR N, ROGERS PAW. (1995) Endometrial vascular smooth muscle cell proliferation in women with or without menorrhagia. Fertility Society of Australia, Melbourne, November 19-25th. FSA 73.
129. ROGERS PAW, LEDERMAN F, KOORY J, TAYLOR N, HEALY DL. (1995) Endometrial vascular smooth muscle oestrogen and progesterone receptor distribution in women with and without menorrhagia. Fertility Society of Australia, Melbourne, November 19-25th. FSA 74.
130. TAYLOR NH, ROGERS PAW, HEALY DL. (1995) Clinical evaluation of endometrial ablation for menorrhagia. Fertility Society of Australia, Melbourne, November 19-25th. FSA 148.
131. WITJAKSONO J, LAU TM, HEALY DL, ROGERS PAW. (1995) Estrogen treatment for increased bleeding in Norplant users. Fertility Society of Australia, Melbourne, November 19-25th. FSA 149.
132. ABBERTON KM, HEALY DL, ROGERS PAW. (1996) Vascular smooth muscle cell proliferation in the human endometrium. Sixth World Congress for Microcirculation, Munich, Germany, August 25-30th. P480.
133. ROGERS PAW, LEDERMAN F, KOORY J, TAYLOR N, HEALY DL. (1996) Endometrial vascular smooth muscle oestrogen and progesterone receptor distribution in women with and without menorrhagia. Sixth World Congress for Microcirculation, Munich, Germany, August 25-30th. P481.
134. HUI LL, ROGERS PAW. (1996) Expression of integrin $\alpha_v\beta_3$ in human endometrium throughout the menstrual cycle. 4th Annual Scientific Meeting, Marysville, Victoria, October 17-20. 15.

135. WINGFIELD M, MACPHERSON A, ROGERS PAW, HEALY DL. (1996) Endometrium in endometriosis. Vth World Congress on Endometriosis, Yokohama, Japan. October 21-24. 0-63.
136. WINGFIELD M, MACPHERSON A, ROGERS PAW, HEALY DL. (1996) Endometrial CA125 in endometriosis. Vth World Congress on Endometriosis, Yokohama, Japan, October 21-24. P-87.
137. LEDERMAN FL, TAYLOR NH, ROGERS PAW. (1996) Regional variability in endometrial endothelial cell proliferation within the uterus. The Australian Society for Medical Research. 35th National Scientific Conference, Gold Coast, Queensland, November 24-27th. POS-1-10.
138. ORRE M, MAMERS P, SUSIL B, QUINN M, HEALY DL, ROGERS PAW. (1996) Vascular endothelial growth factor and microvessel density in tumours of the ovary. The Australian Society for Medical Research. 35th National Scientific Conference, Gold Coast, Queensland, November 24-27th. POS-2-17.
139. LEDERMAN FL, TAYLOR NH, ROGERS PAW. (1997) Regional variability in endometrial endothelial cell proliferation within the uterus. Australian and New Zealand Microcirculation Society. Ninth Microcirculation Symposium. Melbourne, Victoria, January 31 - February 2.
140. ORRE M, ROGERS PAW (1997) Vascular and non-vascular cell proliferation in tumours of the ovary. Australian and New Zealand Microcirculation Society. Ninth Microcirculation Symposium. Melbourne, Victoria, January 31 - February 2.
141. ABBERTON KM, HEALY DL, ROGERS PAW (1997) Vascular smooth muscle cell proliferation in the arterioles of human endometrium. Australian and New Zealand Microcirculation Society. Ninth Microcirculation Symposium. Melbourne, Victoria, January 31 - February 2.
142. LOFTI-MIRI M, ROGERS PAW (1997) Vascularisation of the ovarian follicle prior to ovulation in the rat. Australian and New Zealand Microcirculation Society. Ninth Microcirculation Symposium. Melbourne, Victoria, January 31 - February 2.
143. ROGERS PAW (1997) Endometrial microvascular growth in normal and dysfunctional states. International Ferring Symposium on Function and Dysfunction of the Non-pregnant Uterus. Germany, June 19-21.
144. ROGERS PAW (1997) Endometrial angiogenesis. Gordon Research Conference, Boston, USA, 19-22 August.
145. ROSAMILIA A, CANN L, DWYER PL, ROGERS PAW (1997) Bladder microvasculature in women with interstitial cystitis. International Continence Society. Japan, 23-26

September.

146. VINCENT AJ, MALAKOOTI N, AFFANDI B, ROGERS PAW, SALAMONSEN LA. (1997) Matrix metalloproteinase-9 and migratory cells and associated with abnormal uterine bleeding in women. Australian Society for Reproductive Biology. Canberra, ACT, 29 September - 1 October.
147. ROSAMILIA A, CANN L, DWYER PL, ROGERS PAW (1997) Bladder microvasculature in interstitial cystitis. International Research Symposium on Interstitial Cystitis. Washington, D.C., October 30-31.
148. ORRE M, ROGERS PAW (1997) Vascular differences between mucinous and serous ovarian tumours. Second Peter Mac Symposium. New Strategies for Cancer Detection and Therapy. Melbourne, Victoria, November 9-12.
149. ABBERTON K, ROGERS PAW (1997) Transforming growth factor and endothelin in the endometrium of women with menorrhagia. The Australian Society for Medical Research. 36th National Scientific Conference. Adelaide, S.A. 23-26 November 1997.
150. LAU TM, AFFANDI B, ROGERS PAW (1997) VEGF expression in normal and Norplant endometrium. The Australian Society for Medical Research. 36th National Scientific Conference. Adelaide, S.A. 23-26 November 1997.
151. WEBSTER D, ROGERS PAW, LEETON J. (1997) Monash IVF donor oocyte program - Data 1993-1996. The Fertility Society of Australia. XVI Annual Scientific Meeting. Adelaide, 2-4 December 1997.
152. LEDERMAN F, TADOKORO N, ROGERS PAW. (1997) Correlation of vascular endothelial growth factor (VEGF) expression with endothelial cell proliferation in the rat uterus during early pregnancy. The Fertility Society of Australia. XVI Annual Scientific Meeting. Adelaide, 2-4 December 1997.
153. VOLLENHOVEN B, BAKKER M, TAYLOR N, LAWRENCE M, ROGERS PAW. (1997) Representational difference analysis: a new and valuable tool for studying the aetiology of fibroids. The Fertility Society of Australia. XVI Annual Scientific Meeting. Adelaide, 2-4 December 1997.
154. LEETON J, STEPHENS S, WITHERS R, WEBSTER D, ELDAR-GEVA T, ROGERS PAW. (1997) Clinical factors determining pregnancy rate on a donor egg program. The Fertility Society of Australia. XVI Annual Scientific Meeting. Adelaide, 2-4 December 1997.
155. ROGERS PAW, GARGETT C, LEDERMAN F, TAYLOR N, LAU T. (1998) VEGF production by cultured human endometrial tissue and separated cells. Keystone Symposium on Molecular and Cellular Biology. Angiogenesis and Vascular Remodelling. Steamboat Springs, Colorado, March 28 - April 3, 1998.

156. VOLLENHOVEN B, ROGERS PAW, HEALY DL. Uterine fibroids, what makes them grow? Victorian Women's Health Conference, Melbourne, June 9-10, 1998.
157. ROGERS PAW, GARGETT C, LEDERMAN F, TAYLOR N, LAU T, WINGFIELD M, HEALY DL. Endometrial angiogenesis. VI World Congress on Endometriosis. Quebec, Canada, June 30-July 4, 1998.
158. VOLLENHOVEN BJ, BAKKER M, TAYLOR N, LAWRENCE M, ROGERS PAW. (1998) Are there unique genes in uterine leiomyomas compared with normal myometrium which would explain the growth of these tumours? American Society for Reproductive Medicine. 54th Annual Meeting. USA, October 3-9, 1998.
159. ROGERS PAW, GARGETT C, LEDERMAN F, TAYLOR N, LAU T (1998) Lack of correlation between VEGF production and angiogenesis in human endometrium. Fertility Society of Australia Hobart, October 28 - November 1, 1998.
160. HEFFERNAN C, GARGETT CE, ROGERS PAW (1998) Angiogenesis inhibitors in human endometrium. Australian Society for Medical Research 37th National Scientific Conference. Hobart, November 22-25, 1998.
161. BUCAK K, GARGETT CE, ROGERS PAW (1998) Isolation and culture of human myometrical microvascular endothelial cells. Australian Society for Medical Research 37th National Scientific Conference. Hobart, November 22-25, 1998.
162. VINCENT AL, MALAKOOTI N, ROGERS PAW, AFFANDI B, SALAMONSEN LA (1998) Endometrial breakdown in women using Norplant is associated with migratory cell expression of matrix metalloproteinase-9 (gelatinaseB). Soc Syn Invest
163. ROGERS PAW, GARGETT C, HEFFERNAN C, LEDERMAN F, TAYLOR N (1999) Regulation of angiogenesis in human endometrium: The role of angiogenesis promoters and inhibitors. Proceedings of the Tenth Australian and New Zealand Microcirculation Symposium, Adelaide 27-29 January 1999.
164. GARGETT CE, BUCAK K, ROGERS PAW (1999) Isolation and characterisation of human myometrial microvascular endothelial cells. Proceedings of the Tenth Australian and New Zealand Microcirculation Symposium, Adelaide 27-29 January 1999.
165. ABBERTON KM, ROGERS PAW (1999) Expression of the receptor tyrosine kinases tie-1 and tie-2 in the microvasculature of the human uterus. Proceedings of the Tenth Australian and New Zealand Microcirculation Symposium, Adelaide 27-29 January 1999.
36. ROGERS PAW, ORRE M. (1999) Angiogenesis in ovarian cancer. Institute of Reproduction and Development Symposium. Victoria May 7-8, 1999.
7. VOLLENHOVEN BJ, CASEY R, ROGERS PAW (1999) An immunohistochemical analysis of fibroid vasculature. American Society of Reproductive Medicine, Toronto,

Canada, 25-30 September 1999.

168. GARGETT C, LEDERMAN F (1999) Focal VEGF correlates with angiogenesis in human endometrium. The Australian Society for Medical Research, NSW, 27 - 29 November 1999.
169. ZAITSEVA M, ROGERS P, GARGETT C. (1999) Estrogen regulation of VEGF receptors in human myometrium and fibroids. The Australian Society for Medical Research, NSW, 27 - 29 November 1999.
170. MANUELPIILLAI U, ROGERS PAW, VOLLENHOVEN B. (2000) Effects of insulin like growth factors and estrogen on uterine leiomyoma and myometrial smooth muscle cell proliferation. The Fertility Society of Australia/Australian Society for Reproductive Biology, Canberra, 26 - 30 April 2000.
171. ROGERS PAW, PLUNKETT D, AFFANDI B. (2000) Perivascular smooth muscle α -actin is reduced in the endometrium of women with progestin-only contraceptive breakthrough bleeding. The Fertility Society of Australia/Australian Society for Reproductive Biology, Canberra, 26 - 30 April 2000.
172. GARGETT CE, LEDERMAN FL, ROGERS PAW. (2000) VEGF, intravascular neutrophils and human endometrial angiogenesis. The Fertility Society of Australia/Australian Society for Reproductive Biology, Canberra, 26 - 30 April 2000.
173. ZAITSEVA M, ROGERS PAW, GARGETT CE. (2000) Regulation of VEGF receptors by estrogen and progesterone in microvascular endothelial cells from human myometrium and fibroids. The Fertility Society of Australia/Australian Society for Reproductive Biology, Canberra, 26 - 30 April 2000.
174. FINDLAY JK, JONES RL, CRITCHLEY HOD, ROGERS PAW, SALAMONSEN LA. (2000) Endocrine and paracrine regulation of decidualisation. Simpson Symposium, Edinburgh, August 2000.